Image# 2020092592849	68100
FEC	
FORM 3X	

09/25/2020 14 : 07

PAGE 1 / 108

REPO	RT O	F REC	EIPTS
			IENTS
For Other	Inan An	Authorized	Committee

								Office Use	e Only	
1.	NAME OF COMMITTEE (in fu		e or print ▼		nple: If typi the lines.	ng, type	12FE4N	M5		
S	elect Medical (Corporatio	n PAC							
ADI	DRESS (number and	street)	714 Gettysburg Road							
	Check if differ than previousl reported. (ACC	У . К	lechanicsburg				PA	17055		
2.	FEC IDENTIFICA	TION NUMB	ER ▼	CITY A		S		Z	ZIP CODE	A
	C C00546119			3. IS THIS REPORT		NEW (N) OR	~	AMENDED A)		
4.	TYPE OF REPO (Choose One)	ORT (b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Au	g 20 (M8)	(No	ov 20 (M11) on-Election ar Only)
	(a) Quarterly Repo	rts:	Due On:	Mar 20 (M3)		Jun 20 (M6)	Se	p 20 (M9)	(No	ec 20 (M12) on-Election ar Only)
	April 15 Quarterly	Report (Q1)		Apr 20 (M4)		Jul 20 (M7)	<u> </u>	et 20 (M10)	<u> </u>	n 31 (YE)
	July 15	Report (Q2)	(C) 12-Day PRE-Electio	n	Primary (12F			al (12G)	Ru	noff (12R)
	October 1 Quarterly	5 Report (Q3)	Report for the	ne:	Convention ((12C)	Specia			
	January 3 Year-End	1 Report (YE)	E	Election on	05 /	21	2019		in the State of	PA
	July 31 M Report (No Year Only)	on-election	(d) 30-Day POST -Electi Report for ti		General (300	G)	Runoff	(30R)	Sp	ecial (30S)
	Terminatio (TER)	n Report		Election on	M M /	D D /	Y Y Y		in the State of	
5.	Covering Period	0 <u>1</u>		019	through	05	/ D D 01	/ Y Y 2019		
	ertify that I have exa	V	eport and to the be Valters, William, , ,	est of my know	ledge and	belief it is true	e, correct a	nd complete).	
Тур	e or Print Name of	Ireasurer _								
Sigi	nature of Treasurer	Walters, W	/illiam, , ,		Electronicall	y Filed] Da	ate 09	M / D 25		2020
NO	TE: Submission of fal	se, erroneous	or incomplete infor	mation may sul	pject the per	son signing thi	s Report to	the penalties	s of 52 U.S	S.C. § 30109
	Office Use Only								FORM ev. 05/2016	

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

•	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
٧	Vrite or Type Committee Name		
Ş	Select Medical Corporation PAC		
R	Report Covering the Period: From:	01 / D D / Y Y Y Y 01 01 70:	05 / 01 / Y Y Y Y Y 2019
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2019		136005.52
	(b) Cash on Hand at Beginning of Reporting Period	136005.52	
	(c) Total Receipts (from Line 19)	43502.08	43502.08
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	179507.60	179507.60
7.	Total Disbursements (from Line 31)	148500.00	148500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31007.60	31007.60
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Select Medical Corporation PAC

Report Covering the Period: From: 01	01 2019 To:	05 01 2019
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	· · · · ·	
(a) Individuals/Persons Other		
Than Political Committees	37001.36	37001.36
(i) Itemized (use Schedule A)	01001.00	37001.30
(ii) Unitemized	6500.72	6500.72
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	43502.08	43502.08
(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)▶	43502.08	43502.08
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(a) Total Transform (add 19(a) and 19(b))	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	43502.08	43502.08
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	43502.08	43502.08

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	148500.00	148500.00
Independent Expenditures	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees		0.00
 (c) Other Political Committees (such as PACs) 	0.00	
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds (c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	148500.00	148500.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	148500.00	148500.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
1 20	1 01111	57	(110 .	05/2010	,

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

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					0.00
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					43502.08
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	-			-	0.00
	-			-	43502.08
1		1			0.00
ļ	-	-	-	-	0.00
-	-7-	-	-	-7-	
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COLUMN B

Calendar Year-to-Date

Page 5

	CHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LI (check			PAGE	60	F 108		
IT	EMIZED RECEIPTS			for each category of the	× 11	-	11b	11c	12			
				Detailed Summary Page								
	y information copied from such Reports and Sta for commercial purposes, other than using the							soliciting	contribu			
\square	NAME OF COMMITTEE (In Full)											
\rangle	Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Bencomo, Dionisio, , Mr.,	al) or Full C	Drga	nization Name	Date	e of Re	ceipt					
	Mailing Address 2851 SW 137 Court				C		D D 25	/ Y	ү ү 2019	Ŷ		
	City	State FL		Zip Code	Tra	ansacti	on ID :	A2019-45	5748			
	Miami			33175	Amo	unt of	Each Re	eceipt thi	s Period			
	FEC ID number of contributing federal political committee.	С							115.	39		
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)	— П	Memo	Item					
	Select Medical Corporation	Vice	e Pr	esident								
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Primary General			000.70	11							
	Other (specify) v		-	230.78								
B.	Full Name of Individual (Last, First, Middle Initia Bencomo, Dionisio, , Mr.,	al) or Full C	Drga	nization Name	Date	of Re	ceipt					
	Mailing Address 2851 SW 137 Court											
			02 08 2019									
	City	State		Zip Code	Tra	insacti	on ID : /	A2019-11	3406			
	Miami	FL		33175	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					-		115.	39		
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) esident		Memo	Item					
	Receipt For:			ar-to-Date 🔻								
	Primary General	, iggi oguto	100		1							
	Other (specify) V	L	,	346.17	1							
C.	Full Name of Individual (Last, First, Middle Initia Bencomo, Dionisio, , Mr.,	dle Initial) or Full Organization Name					ceipt					
	Mailing Address 2851 SW 137 Court					2	D D 22	/ Y	y y 2019	Y		
	City	State		Zip Code	Tr	ansacti	ion ID :	A2019-32	27775			
	Miami	FL		33175	Amo	unt of	Each Re	eceipt thi	s Period			
	FEC ID number of contributing federal political committee.	С					,	,	115.	39		
	Name of Employer (for Individual)		•	tion (for Individual)		Memo	Item					
	Select Medical Corporation			esident								
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Other (specify)		-	461.56]							
s	UBTOTAL of Receipts This Page (optional)			•					346.1	17		

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Form/Schedule: SA11AI Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule: SA11AI Transaction ID:

This report is being amended to correctly disclose the Terri Sewell for Congress contribution as split \$2,500 to the Primary Election and \$2,500 to the General Election. The candidate accurately reported the contribution on the 2019 July Quarterly Report. Due to a clerical error, it was originally disclosed entirely to the General Election. We have implemented review proceedures to help prevent this error in the future.

	ige# 202003233204300107											
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS						nly on	MBER e) 11b 14	: PAG	BE 8		108
	y information copied from such Reports and S for commercial purposes, other than using the						e purp	ose of	solicitin	g contri	ibutior	ns
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC)										
Α.	Full Name of Individual (Last, First, Middle Inite Bencomo, Dionisio, , Mr.,	tial) or Full O	rgar	nization Name		Date	of Red	ceipt				
	Mailing Address 2851 SW 137 Court					^M 03	M /	08		2019]
	City Miami	State FL		Zip Code 33175					A2019- Receipt t		od	
	FEC ID number of contributing federal political committee.	С				<u> </u>		7		11	15.39	
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident		ſ	Nemo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 576.95]							
В.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr., Mailing Address 2851 SW 137 Court	tial) or Full O	rgar	nization Name		Date	VI /	D 1		Y		1
	City	State		Zin Code		03		22		2019	_	J
	City Miami	State FL		Zip Code 33175				-	A2019-4 Receipt t		od	
	FEC ID number of contributing federal political committee.	С				Ē		7	т	11	15.39	
	Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Vice President				ľ	Nemo	ltem				
	Receipt For: Primary General	Aggregate	Yea	r-to-Date ▼								
	Other (specify) v											
c.	Full Name of Individual (Last, First, Middle Ini Bencomo, Dionisio, , Mr.,	tial) or Full O	rgar	nization Name		Date	of Red	ceipt				
	Mailing Address 2851 SW 137 Court					^M 04	M /	05		2019]
	City Miami	State FL		Zip Code 33175				-	: A2019- Receipt t			
	FEC ID number of contributing federal political committee.	С						9	. ,	11	15.39	
	Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Vice President					Memo	Item				
	Receipt For:	Aggregate	Aggregate Year-to-Date ▼									
	Other (specify)		- j -	807.73]							
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SUBTOTAL of Receipts This Page (optional)						34	6.17	,
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE NUMBER: PAGE 9 OF 108 (check only one) 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC					
Α.	Full Name of Individual (Last, First, Middle Initia Bencomo, Dionisio, , Mr.,	al) or Full C	Organization Name	Date of Receipt		
	Mailing Address 2851 SW 137 Court	-		04 / D D / Y Y Y Y 2019		
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-826593 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		115.39		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]		
В.	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	al) or Full C	Organization Name	Date of Receipt		
	Mailing Address 207 Bryant St					
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-45771 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		115.39		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.78]		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	al) or Full C	Organization Name	Date of Receipt		
	Mailing Address 207 Bryant St			02 08 / Y Y Y Y 02 08		
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-113389 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		115.39		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17]		
s	UBTOTAL of Receipts This Page (optional)			346.17		

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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page Image: Structure of the Detailed Summary Page													
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC													
Α.	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	l) or Full C	Drganization Name	Date of Receipt										
	Mailing Address 207 Bryant St			02 22 2019										
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-327758 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.56											
В.	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	l) or Full C	Drganization Name	Date of Receipt										
	Mailing Address 207 Bryant St	M M / D D / Y												
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-521940 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 576.95											
<u> </u>	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	l) or Full C	Drganization Name	Date of Receipt										
	Mailing Address 207 Bryant St	1		03 / D D / Y Y Y Y 2019										
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-540431 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item										
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼											
	Other (specify)		692.34											
s	UBTOTAL of Receipts This Page (optional)			346.17										

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 108 (check only one) I1a 11b 11c 12 I1a 11b 11c 12 I3 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	AC										
Full Name of Individual (Last, First, Middle Bolcavage, Theodore, J, Mr.,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 207 Bryant St	Stata	Zin Code	04 / D5 / Y Y Y Y 2019								
City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-826013 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.39								
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	1								
Full Name of Individual (Last, First, Middle B. Bolcavage, Theodore, J, Mr.,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 207 Bryant St	04 / D D / Y Y Y Y Y Y 2019 2019										
City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-826576 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.39								
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]								
Full Name of Individual (Last, First, Middle C. Bradley, Daniel, F, Mr.,	nitial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 2261 Turk Road		1	M M / D D / Y Y Y Y Y 01 25 2019								
City Doylestown	State PA	Zip Code 18901	Transaction ID : A2019-45740 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.31								
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.62]								
SUBTOTAL of Receipts This Page (optional).			423.09								

This Period (last page this line number only)		 -	 	-	 	-10-	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 12 OF

			Detailed Summary Page		×	11a 13		11b 14	11c		12 16	17										
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements ma name and a	ay not be sold or used by a ddress of any political comm	iny perso nittee to	on f sol	or the	pur ntrib	pose of	solicitir	ig co ch cc	ontribut	ions										
$\left\rangle$	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC																					
Α.	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr., Mailing Address 2261 Turk Road	rganization Name		[Date of	_	D E		YYY	Y I	Y											
	City Doylestown	State PA	Zip Code 18901						A2019-	1133												
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period																		
	Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	upation (for Individual) sident Year-to-Date ▼ 576.93			Me	emc) Item															
В.	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr., Mailing Address 2261 Turk Road		[Date of	[:] Re	ceipt		YY	Ý	Y												
	City Doylestown FEC ID number of contributing	State PA	Zip Code 18901		ŀ				A2019- Receipt 1	3277	Period	_										
	federal political committee. Name of Employer (for Individual) Select Medical Corporation	of Employer (for Individual) Occupation (for Individual)										Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.24																			
C.	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr., Mailing Address 2261 Turk Road	l) or Full O	rganization Name		[Date of	Re	ceipt			019	Y										
	City Doylestown	State PA	Zip Code 18901			Trans		ion ID :	A2019-	5219	949											
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt								31										
	Name of Employer (for Individual) Select Medical Corporation Receipt For:	Pres	upation (for Individual) sident Year-to-Date ▼			Me	emo	ttem														
	Primary General Other (specify)		961.55																			
	UBTOTAL of Receipts This Page (optional)					-		9	5	+	576.9	93										
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE NUMBER: PAGE 13 OF 108 (check only one) Image: state stat									
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;									
Α.	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr.,	al) or Full C	organization Name	Date of Receipt							
	Mailing Address 2261 Turk Road			03 / D D / Y Y Y Y 22 2019							
	City	State	Zip Code	Transaction ID : A2019-540440							
	Doylestown	PA	18901	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		192.31							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item							
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		1153.86	1							
В.	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr.,	al) or Full C	organization Name	Date of Receipt							
	Mailing Address 2261 Turk Road			04 05 2019							
	City	State	Zip Code	Transaction ID : A2019-826022							
	Doylestown	PA	18901	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С	192.31								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17]							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr.,	al) or Full C	Prganization Name	Date of Receipt							
	Mailing Address 2261 Turk Road			04 19 2019							
	City Doylestown	State PA	Zip Code 18901	Transaction ID : A2019-826585 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		192.31							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1538.48]							
s	UBTOTAL of Receipts This Page (optional)			576.93							

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE NUMBER: PAGE 14 OF 108 (check only one) Image: Check												
	y information copied from such Reports and Sta for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	· · · · · · · · · · · · · · · · · · ·												
Α.	Full Name of Individual (Last, First, Middle Initi Cannon, Matthew, D, ,	al) or Full C	rganization Name	Date of Receipt										
	Mailing Address 19073 Twilight Trl			01 / Y Y Y Y 01 25 2019										
	City	State	Zip Code	Transaction ID : A2019-45766										
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		115.39										
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item										
	Receipt For:	Anareaste	Year-to-Date ▼											
	Primary General	riggioguto												
	Other (specify) ▼	L	230.78											
_	Full Name of Individual (Last, First, Middle Initia	al) or Full C	rganization Name											
В.	Cannon, Matthew, D, ,			Date of Receipt										
	Mailing Address 19073 Twilight Trl			02 08 2019										
	City	State	Zip Code	Transaction ID : A2019-113384										
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼ 346.17]										
<u> </u>	Full Name of Individual (Last, First, Middle Initi Cannon, Matthew, D, ,	al) or Full C	rganization Name	Date of Receipt										
	Mailing Address 19073 Twilight Trl			02 22 2019										
	City	State	Zip Code	Transaction ID : A2019-327793										
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
	Select Medical Corporation	Vice	President											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General			1										
	Other (specify)	L	461.56											
s	UBTOTAL of Receipts This Page (optional)			346.17										

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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 OF 108										
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17										
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC													
Α.	Full Name of Individual (Last, First, Middle Initia Cannon, Matthew, D, ,	l) or Full C	Organization Name	Date of Receipt										
	Mailing Address 19073 Twilight Trl			03 08 2019										
	City	State	Zip Code	Transaction ID : A2019-521935										
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item										
	Peopint For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		576.95]										
В.	Full Name of Individual (Last, First, Middle Initia Cannon, Matthew, D, ,	l) or Full C	Organization Name	Date of Receipt										
	Mailing Address 19073 Twilight Trl	03 22 2019												
	City	State	Zip Code	Transaction ID : A2019-540465										
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39 Memo Item										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		, 692.34]										
с.	Full Name of Individual (Last, First, Middle Initia Cannon, Matthew, D, ,	l) or Full C	Organization Name	Date of Receipt										
	Mailing Address 19073 Twilight Trl			M M / D D / Y Y Y Y 04 05 2019										
	City Eden Prairie	State MN	Zip Code 55346-4047	Transaction ID : A2019-826047										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 115.39										
	Name of Employer (for Individual)		upation (for Individual)	Memo Item										
	Select Medical Corporation Receipt For:	I	e President											
	Primary General	Aggregate	Year-to-Date V											
	Other (specify)		807.73											
s	UBTOTAL of Receipts This Page (optional)			346.17										

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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16 OF 108			
	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)			
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	y information copied from such Reports and Sta for commercial purposes, other than using the r			r person for the purpose of soliciting contributions tee to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC						
<u> </u>	Full Name of Individual (Last, First, Middle Initia Cannon, Matthew, D, ,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 19073 Twilight Trl			04 / D D / Y Y Y Y 04 19 2019			
	City	State	Zip Code	Transaction ID : A2019-826571			
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		923.12				
В.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 1415 Aaron Creek Drive	Address 1415 Aaron Creek Drive					
	City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-45743 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		230.78				
с.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 1415 Aaron Creek Drive			02 / D D / Y Y Y Y Y 2019			
	City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-113401			
	FEC ID number of contributing federal political committee.	С	40023	Amount of Each Receipt this Period 115.39			
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item			
	Select Medical Corporation	Vice	e President				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Other (specify)		346.17				
s	UBTOTAL of Receipts This Page (optional)			346.17			

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 108 (check only one) X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions ee to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	al) or Full C	Date of Receipt									
	Mailing Address 1415 Aaron Creek Drive			M M / D / Y								
	City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-327770								
			40023	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		461.56]								
В.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 1415 Aaron Creek Drive			03 08 2019								
	City	State	Zip Code	Transaction ID : A2019-521952								
	Fisherville	KY	40023	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For: Primary General	Aggregate	Year-to-Date V	-								
	Other (specify) v		576.95									
C.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 1415 Aaron Creek Drive			M M / D D / Y Y Y Y 03 22 2019								
	City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-540443								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For:		Year-to-Date ▼	—								
	Primary General Other (specify)		692.34									
s	UBTOTAL of Receipts This Page (optional)			346.17								

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR (check	c only	/ on		₹ :	PAG 11c 15	GE	18 C)F	108		
	y information copied from such Reports and Sta for commercial purposes, other than using the r													3		
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC															
Α.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	l) or Full (Orgai	nization Name	Date of Receipt											
	Mailing Address 1415 Aaron Creek Drive				04 05 2019 Transaction ID : A2019-826025											
	City Fisherville	State KY		Zip Code 40023				-		2019- ceipt t		-	1			
	FEC ID number of contributing federal political committee.	С						y	_	-7-		115.	.39			
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) esident		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	egate Year-to-Date ▼ 807.73													
в.	Full Name of Individual (Last, First, Middle Initia Chambers, Jason, S, Mr.,	ll) or Full (Orgai	nization Name	Da	ite of	Red	ceipt								
	Mailing Address 1415 Aaron Creek Drive	State			N	04	/	D 1				019 [°]	Y			
	City Fisherville	Zip Code 40023	Transaction ID : A2019-826588 Amount of Each Receipt this Per													
	FEC ID number of contributing federal political committee.	С			115.39											
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) esident	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 923.12												
с.	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	l) or Full (Orgai	nization Name	Da	ite of	Red	ceipt								
	Mailing Address 700 Gladstone Court	1			N	01	/	D 2	^р 5	/		019 [°]	Y			
	City Mechanicsburg	State PA		Zip Code 17055						2019- ceipt t			1			
	FEC ID number of contributing federal political committee.				192.31											
	Select Medical Corporation			tion (for Individual) nt	Memo Item											
_	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 384.62	34.62											

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S	CHEDULE A (FEC Form 3X)		 ,	Jse separate schedule(s)	FOR LINE N		PAGE	19 OF	108				
IT	EMIZED RECEIPTS			or each category of the	``	¬́ г	п., г	٦					
			[Detailed Summary Page	× 11a	11b	11c	12					
	information and from such Description of Ob				13	14	15	16	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the												
$\left \right\rangle$	NAME OF COMMITTEE (In Full)												
	Select Medical Corporation PAC												
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Drgar	nization Name									
Α.	Chernow, David, S, Mr.,	,	0		Date of R	eceipt							
	Mailing Address 700 Gladstone Court				M = M / D = D / Y = Y = Y								
	01	Otata		7:	02	08		2019					
	City Mechanicsburg	State PA		Zip Code 17055			2019-113	-					
				17055	Amount of	Each Re	ceipt this	Period					
	FEC ID number of contributing	С						192.31	1				
	federal political committee.						7						
	Name of Employer (for Individual)	Occ	upat	ion (for Individual)	Mem	o Item							
	Select Medical Corporation	Pre	side	nt									
	Receipt For:	Aggregate	Yea	r-to-Date 🔻									
	Primary General			E76 02									
	Other (specify) v		-	576.93									
	Full Name of Individual (Last, First, Middle Initia	al) or Full (Jraar	vization Namo									
В.		ai) or Full C	луа		Date of R	eceint							
0.	Mailing Address 700 Gladstone Court							Y Y Y					
					02	22		2019					
	City	State		Zip Code	Transac	ion ID : A	2019-3277	786					
	Mechanicsburg	sburg PA 17055											
	FEC ID number of contributing	С						102.24					
	federal political committee.	C				-y-	-9-	192.31					
	Name of Employer (for Individual)	Occ	upat	tion (for Individual)	Mem	o Item							
	Select Medical Corporation		side	,									
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General												
	Other (specify)		_	769.24									
	Full Name of Individual (Last First Middle Indi		200	vization Nome									
C	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	ai) of Full C	Jigar	nzation mame	Date of R	eceipt							
σ.	Mailing Address 700 Gladstone Court							Y Y Y					
					03	08		2019					
	City	State		Zip Code	Transac	tion ID:A	2019-521	968					
	Mechanicsburg	PA		17055	Amount of	Each Re	ceipt this	Period					
	FEC ID number of contributing	С						192.31	1				
	federal political committee.	U				y	<u> </u>	152.5					
	Name of Employer (for Individual)	000	upat	ion (for Individual)	Mem	o Item							
	Select Medical Corporation		sider	(
	Receipt For:	Aggregate	Yea	r-to-Date ▼	-								
	Primary General	.33. 09410											
	Other (specify)		961.55										
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								576.93	2				
S	UBTOTAL of Receipts This Page (optional)			••••••		y		570.93	,				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 108 (check only one) Image: Check								
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions tee to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	Name of Individual (Last, First, Middle Initial) or Full Organization Name ernow, David, S, Mr.,										
	Mailing Address 700 Gladstone Court			03 / D D / Y Y Y Y Y 22 2019								
	City	State PA	Zip Code	Transaction ID : A2019-540458								
	Mechanicsburg	FA	17055	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item								
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General Other (specify) ▼		1153.86									
В.	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 700 Gladstone Court			04 05 2019								
	City	State	Zip Code	Transaction ID : A2019-826040								
	Mechanicsburg	PA	17055	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item								
	Receipt For:	Aggregate	• Year-to-Date ▼ , 1346.17									
— C.	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 700 Gladstone Court			04 19 2019								
	City	State	Zip Code	Transaction ID : A2019-826564								
	Mechanicsburg	PA	17055	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) sident	Memo Item								
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General Other (specify)		1538.48									
s	UBTOTAL of Receipts This Page (optional)			576.93								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 OF 108 (check only one) Image: Check only one in the image: Check only one in the image: Check only one in the image: Check on the image:								
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	,										
Α.	Full Name of Individual (Last, First, Middle Init Deemer, Miriam, R, Mrs.,	al) or Full C	rganization Name	Date of Receipt								
	Mailing Address 285 Merriweather Rd	01-1-	Zin Octo	01 / D D / Y Y Y Y 2019								
	City Grosse Pointe Farms	State MI	Zip Code 48236-3428	Transaction ID : A2019-45761								
			40230-3420	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Select Medical Corporation	Vice	e President									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General			1								
	Other (specify)	L	230.78									
	Full Name of Individual (Last, First, Middle Init	al) or Full C	organization Name									
В.	Deemer, Miriam, R, Mrs.,			Date of Receipt								
	Mailing Address 285 Merriweather Rd			02 08 / Y Y Y Y 2019								
	City	State	Zip Code	Transaction ID : A2019-113379								
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		346.17]								
с.	Full Name of Individual (Last, First, Middle Init Deemer, Miriam, R, Mrs.,	al) or Full C	organization Name	Date of Receipt								
	Mailing Address 285 Merriweather Rd			M M / D D / Y Y Y Y 02 22 2019								
	City	State	Zip Code	Transaction ID : A2019-327788								
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Select Medical Corporation		President	-								
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	Primary General			1								
	Other (specify)	L	461.56	1								
s	UBTOTAL of Receipts This Page (optional)			346.17								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 108 (check only one) Image: Check										
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	,											
Α.	Full Name of Individual (Last, First, Middle Initi Deemer, Miriam, R, Mrs.,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 285 Merriweather Rd			03 / D D / Y Y Y Y 03 08 2019									
	City Grosse Pointe Farms	State MI	Zip Code 48236-3428	Transaction ID : A2019-521970 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95]									
В.	Full Name of Individual (Last, First, Middle Initi Deemer, Miriam, R, Mrs., Mailing Address 285 Merriweather Rd	al) or Full O	rganization Name	Date of Receipt									
	City	State	Zip Code	03 22 2019 Transaction ID : A2019-540460									
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼										
	Other (specify) ▼		, 692.34]									
с.	Full Name of Individual (Last, First, Middle Initi Deemer, Miriam, R, Mrs.,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 285 Merriweather Rd			04 05 2019									
	City Grosse Pointe Farms	State MI	Zip Code 48236-3428	Transaction ID : A2019-826042 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.73]									
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 OF 108 (check only one) Image: state st							
	ny information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC										
Α.	Full Name of Individual (Last, First, Middle Initia Deemer, Miriam, R, Mrs.,	ll) or Full C	organization Name	Date of Receipt							
	Mailing Address 285 Merriweather Rd			04 / D D / Y Y Y Y 04 19 2019							
	City	State	Zip Code	Transaction ID : A2019-826566							
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item							
	Receipt For:	Anareaate	Year-to-Date ▼								
	Primary General Other (specify) ▼		923.12]							
В.	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	l) or Full C	organization Name	Date of Receipt							
	Mailing Address 383 Pattonwood Dr			01 25 2019							
	City Southington	State CT	Zip Code 06489	Transaction ID : A2019-45756 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼ 230.78]							
	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	l) or Full C	organization Name	Date of Receipt							
	Mailing Address 383 Pattonwood Dr			02 / D D / Y Y Y Y 02 08 2019							
	City	State CT	Zip Code	Transaction ID : A2019-113374							
	Southington		06489	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		346.17]							
s	UBTOTAL of Receipts This Page (optional)			346.17							

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS			Use separate schedule(s)		R LINE eck onl			F	PAGE	24 OI	F 108
	EIVIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		11b	11	Ic [12	
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	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA											
Α.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr.,	itial) or Full C	Orgai	nization Name		Date o	of Red	ceipt				
	Mailing Address 383 Pattonwood Dr					м м 02	/	22		Y	ү ү ү 2019	Y
	City	State		Zip Code		Trans	sactio	on ID :	A201	19-327	7783	
	Southington	СТ		06489		Amoun	nt of I	Each F	Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	С						7		,	115.3	39
	Name of Employer (for Individual)	Occ	cupat	tion (for Individual)		M	lemo	Item				
	Select Medical Corporation		•	Vice President								
	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻								
	Primary General				11.							
	Other (specify)		7	461.56								
в.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr.,	itial) or Full C	Orgai	nization Name		Date o	of Red	ceipt				
	Mailing Address 383 Pattonwood Dr					03	/	08		Y	y y 2019	Y
	City	State		Zip Code		Trans	sactio	on ID :	A201	9-521	965	
	Southington	СТ		06489		Amoun	nt of I	Each F	Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	С						7		,	115.3	9
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) Vice President		M	lemo	ltem				
	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻								
	Primary General Other (specify) ▼			576.95	11							
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C.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr.,	itial) or Full C	Orgai	nization Name		Date o	of Red	ceipt				
	Mailing Address 383 Pattonwood Dr					03	/	D 22		Y	y y 2019	Y
	City	State		Zip Code		Trans	sacti	on ID :	: A20′	19-54	0455	
	Southington	СТ		06489		Amoun	nt of I	Each F	Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	С						y .		,	115.3	9
	Name of Employer (for Individual)	Occ	cupat	tion (for Individual)		N	1emo	Item				
	Select Medical Corporation		•	/ice President								
	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻								
	Primary General	33 - 3-10			1							
	Other (specify)		-	692.34								

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	CHEDULE A (FEC Form 3X)			Jse separate schedule(s)	FOR LINE NUMBER: PAGE 25 OF 108 (check only one)
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	y information copied from such Reports and Sta for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
A.	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	al) or Full C	Drgar	nization Name	Date of Receipt
	Mailing Address 383 Pattonwood Dr				04 05 2019
	City	State		Zip Code	Transaction ID : A2019-826037
	Southington	СТ		06489	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) /ice President	Memo Item
	Receipt For:	Aggregate	Yea	r-to-Date ▼	
	Primary General Other (specify) ▼		- J -	807.73]
В.	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	al) or Full C	Drgar	nization Name	Date of Receipt
	Mailing Address 383 Pattonwood Dr				04 19 2019
	City Southington	State CT		Zip Code 06489	Transaction ID : A2019-826600 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) Vice President	Memo Item
	Receipt For: Primary General	Aggregate	Yea	r-to-Date ▼	
	Other (specify) ▼		,	923.12	
с.	Full Name of Individual (Last, First, Middle Initia Dishner, Kerry, R, ,	al) or Full C	Drgar	nization Name	Date of Receipt
	Mailing Address 202 Downing PI Suite 1050				01 25 2019
	City	State		Zip Code	Transaction ID : A2019-45760
	Mechanicsburg	PA		17050-6881	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) sident	Memo Item
	Receipt For:	Aggregate	Yea	r-to-Date ▼	
	Primary General Other (specify)		-J-	230.78]
s	UBTOTAL of Receipts This Page (optional)				346.17

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 OF 108 (check only one) I1a 11b 11c 12 I3 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
A.	Full Name of Individual (Last, First, Middle Initi Dishner, Kerry, R, ,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 202 Downing Pl Suite 1050			02 08 / Y Y Y Y 2019
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-113378 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 346.17	
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	organization Name	
В.	Dishner, Kerry, R, , Mailing Address 202 Downing PI Suite 1050			Date of Receipt
	City	State	Zip Code	Transaction ID : A2019-327787
	Mechanicsburg	PA	17050-6881	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		461.56	
с.	Full Name of Individual (Last, First, Middle Initi Dishner, Kerry, R, ,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 202 Downing PI Suite 1050			03 / D D / Y Y Y Y 03 08 / 2019
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-521969
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify)		576.95	

SUBTOTAL of Receipts This Page (optional)						34	46.17	7
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 OF 108 (check only one) I1a 11b 11c 12 I1a 11b 11c 12 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	2		
Α.	Full Name of Individual (Last, First, Middle Init Dishner, Kerry, R, ,	tial) or Full C	organization Name	Date of Receipt
	Mailing Address 202 Downing Pl Suite 1050 City	State	Zip Code	03 / D D / Y Y Y Y 22 2019
	Mechanicsburg	PA	17050-6881	Transaction ID : A2019-540459
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34]
в.	Full Name of Individual (Last, First, Middle Init Dishner, Kerry, R, ,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 202 Downing Pl Suite 1050	Otata	The Octo	04 05 2019
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-826041 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	
с.	Full Name of Individual (Last, First, Middle Ini Dishner, Kerry, R, ,	tial) or Full C	organization Name	Date of Receipt
	Mailing Address 202 Downing PI Suite 1050			M M / D D / Y Y Y Y 04 19 2019
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-826565 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify)		923.12]
s	UBTOTAL of Receipts This Page (optional)			346.17

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		·	Use separate schedule(s) for each category of the Detailed Summary Page	(ch	R LINE eck on 11a			R:	PA(GE	28 OI	- 108 - 17				
	ny information copied from such Reports and St for commercial purposes, other than using the					for the		oose o		olicitir		ntribut	ons				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC																
Α.	Full Name of Individual (Last, First, Middle Initi Duggan, John, F, Mr.,	al) or Full O	rga	nization Name	Date of Receipt												
	Mailing Address 1764 North Meadow Drive			1	M M / D / Y												
	City Mechanicsburg	State PA		Zip Code 17055	_	Trans Amoun											
	FEC ID number of contributing federal political committee.	С						-		-,-		5000.0	0				
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) Vice President		N	lemo	Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 5000.00]												
В.	Full Name of Individual (Last, First, Middle Initi Farley, Kyle, L, Mr., Mailing Address 13316 E 93rd St	al) or Full O)rga	nization Name		Date o		D	D	1		Ý	Ŷ				
	City	State		Zip Code	03 22 2019 Transaction ID : A2019-540454												
	Kansas City	MO		64138-5000		Amoun											
	FEC ID number of contributing federal political committee.	С				<u> </u>		-		-		38.4	7				
	Name of Employer (for Individual) Select Medical Corporation			tion (for Individual) esident		N	lemo	Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ , 230.82]												
с.	Full Name of Individual (Last, First, Middle Initi Farley, Kyle, L, Mr.,	al) or Full O	rga	nization Name		Date o	f Re	ceipt									
	Mailing Address 13316 E 93rd St					04		D 0	5	1	2	019 [°]	Y				
	City Kansas City	State MO		Zip Code 64138-5000		Tran: Amoun		i on ID Each									
	FEC ID number of contributing federal political committee.	С				<u> </u>		y				38.4	7				
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) esident		N	lemo	Item									
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 269.29]												

SUBTOTAL of Receipts This Page (optional)									507	6.94	ŧ
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 OF 108 (check only one) Image: Check									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) Select Medical Corporation F	PAC											
Full Name of Individual (Last, First, Middle A. Farley, Kyle, L, Mr.,	e Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 13316 E 93rd St			04 / D D / Y Y Y Y 2019									
City Kansas City	State MO	Zip Code 64138-5000	Transaction ID : A2019-826599 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		38.47									
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.76]									
Full Name of Individual (Last, First, Middle B. Hammerman, Samuel, I, Doctor,		Organization Name	Date of Receipt									
Mailing Address 6 Windy Drive			01 / Y Y Y Y 01 25 2019									
City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-45763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.31									
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.62]									
Full Name of Individual (Last, First, Middle C. Hammerman, Samuel, I, Docto		Organization Name	Date of Receipt									
Mailing Address 6 Windy Drive			02 / D D / Y Y Y Y 02 08 2019									
City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-113381 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.31									
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.93]									
SUBTOTAL of Receipts This Page (optional)		423.09									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate for each categ Detailed Sumn	ory of the	FOR LINE NUMBER: PAGE 30 OF 108 (check only one) 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Α.	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	al) or Full C	organization Name	1	Date of Receipt					
	Mailing Address 6 Windy Drive				02 22 2019					
	City	State PA	Zip Code		Transaction ID : A2019-327790					
	Shavertown	FA	18708		Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С			192.31					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individent of the second seco	dual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼			769.24						
В.	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	al) or Full C	organization Name		Date of Receipt					
	Mailing Address 6 Windy Drive	03 08 2019								
	City	State	Zip Code		Transaction ID : A2019-521932					
	Shavertown	PA	18708		Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С			192.31					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Indivi ef Medical Officer	dual)	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	961.55						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	al) or Full C	organization Name		Date of Receipt					
	Mailing Address 6 Windy Drive				M M / D D / Y Y Y Y 03 22 2019					
	City Shavertown	State PA	Zip Code 18708		Transaction ID : A2019-540462 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С			192.31					
			upation (for Individent	dual)	Memo Item					
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	Primary General Other (specify)		7	1153.86						
s	UBTOTAL of Receipts This Page (optional)				576.93					

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 OF 108 (check only one) 11a 11a 11b 11c 12 13 14 15 16 17			
			person for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Select Medical Corporation P	AC					
Full Name of Individual (Last, First, Middle A. Hammerman, Samuel, I, Doctor, I.	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 6 Windy Drive			04 / D D / Y Y Y Y 2019			
City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-826044 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.31			
Name of Employer (for Individual) Select Medical Corporation Receipt For:	Chi	upation (for Individual) ef Medical Officer	Memo Item			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17]			
Full Name of Individual (Last, First, Middle B. Hammerman, Samuel, I, Doctor,		organization Name	Date of Receipt			
Mailing Address 6 Windy Drive	04 19 2019					
City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-826568 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	192.31					
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1538.48]			
Full Name of Individual (Last, First, Middle C. Jackson, Martin, F, Mr.,	Initial) or Full C	Prganization Name	Date of Receipt			
Mailing Address 116 Ellesmere Lane	01 / 25 / Y Y Y Y 2019					
City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-45770 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.31			
Name of Employer (for Individual) Select Medical Corporation	Exe	upation (for Individual) cutive Vice President	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.62]			
SUBTOTAL of Receipts This Page (optional))		576.93			

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 OF 108 (check only one) Image: Check only one (Check only one) Image: Check only one (Check on						
	y information copied from such Reports and Sta for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Α.	Full Name of Individual (Last, First, Middle Initia Jackson, Martin, F, Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 116 Ellesmere Lane			02 08 2019						
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-113388 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) cutive Vice President	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.93							
в.	Full Name of Individual (Last, First, Middle Initia Jackson, Martin, F, Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 116 Ellesmere Lane			02 22 2019						
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-327757 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ecutive Vice President	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.24							
С.	Full Name of Individual (Last, First, Middle Initia Jackson, Martin, F, Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 116 Ellesmere Lane			M M / D D / Y Y Y Y 03 08 2019						
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-521939 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) cutive Vice President	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 961.55							

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate for each categ		FOR LINE NUMBER: PAGE 33 OF 108 (check only one) Image: Check only one in the second				
			Detailed Summary Page		★ 11a 11b 11c 12 13 14 15 16 17				
					13 14 15 16 17 rson for the purpose of soliciting contributions to solicit contributions from such committee.				
	OF COMMITTEE (In Full) ct Medical Corporation PAC								
Full Na	me of Individual (Last, First, Middle Initia	I) or Full C	Organization Name	•					
A. Jacks	on, Martin, F, Mr.,	,	5		Date of Receipt				
Mailing Address 116 Ellesmere Lane					M M / D D / Y Y Y Y 03 22 2019				
City Mecha	nicsburg	State PA	Zip Code 17055		Transaction ID : A2019-540430				
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	number of contributing political committee.	С			192.31				
	of Employer (for Individual)		upation (for Individentity of the state of the second seco	,	Memo Item				
Receipt	Medical Corporation			ent	-				
	rimary General	Aggregate	Year-to-Date ▼						
C	other (specify) ▼		-1919-	1153.86					
	me of Individual (Last, First, Middle Initia son, Martin, F, Mr.,	l) or Full C	Organization Name	!	Date of Receipt				
	Address 116 Ellesmere Lane								
		04 05 2019							
City		State	Zip Code		Transaction ID : A2019-826012				
Mecha	nicsburg	PA	17055		Amount of Each Receipt this Period				
	number of contributing political committee.	192.31							
	of Employer (for Individual) Aedical Corporation		upation (for Indivi ocutive Vice Presid	,	Memo Item				
Receipt		Aggregate	Year-to-Date V						
	rimary General Other (specify) ▼		Å 1 1 Å	1346.17					
	me of Individual (Last, First, Middle Initia son, Martin, F, Mr.,	l) or Full C	Organization Name	9	Date of Receipt				
Mailing	Address 116 Ellesmere Lane				M M / D D / Y Y Y Y 04 19 2019				
City		State	Zip Code		Transaction ID : A2019-826575				
Mecha	nicsburg	PA	17055		Amount of Each Receipt this Period				
	number of contributing political committee.	С			192.31				
	of Employer (for Individual)		upation (for Individ		Memo Item				
Receipt	Medical Corporation		cutive Vice Preside	JIIL	-				
	rimary General	Aggregate	Year-to-Date ▼						
C	ther (specify)			1538.48					
SUBTOT	AL of Receipts This Page (optional)				576.93				

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 OF 108 (check only one) I1a 11b 11c 12 I1a 114 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	٨C					
Full Name of Individual (Last, First, Middle I A. James, Stephanie, R, Ms.,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 740 Parkins Mill Rd.			01 25 / Y Y Y Y 01 25 2019			
City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-45758 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78				
Full Name of Individual (Last, First, Middle I B. James, Stephanie, R, Ms.,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 740 Parkins Mill Rd.						
City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-113376 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17				
Full Name of Individual (Last, First, Middle I C. James, Stephanie, R, Ms.,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 740 Parkins Mill Rd.						
City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-327785 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.56				
SUBTOTAL of Receipts This Page (optional)			▶ 346.17			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 OF 108 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) I					
	information copied from such Reports and Sta or commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC								
	Full Name of Individual (Last, First, Middle Initia James, Stephanie, R, Ms.,	al) or Full C	Organization Name	Date of Receipt					
Ν	Jailing Address 740 Parkins Mill Rd.	03 08 2019							
	City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-521967 Amount of Each Receipt this Period					
	EC ID number of contributing ederal political committee.	С		115.39					
5	Name of Employer (for Individual) Select Medical Corporation Receipt For:	Vice	upation (for Individual) e President Year-to-Date ▼	Memo Item					
	Other (specify) V		576.95]					
	Full Name of Individual (Last, First, Middle Initia James, Stephanie, R, Ms.,	al) or Full C	Organization Name	Date of Receipt					
-	Aailing Address 740 Parkins Mill Rd.	03 22 2019							
	Dity Greenville	State SC	Zip Code 29607	Transaction ID : A2019-540457 Amount of Each Receipt this Period					
	EC ID number of contributing ederal political committee.	115.39							
1	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item					
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692,34]					
	Full Name of Individual (Last, First, Middle Initia James, Stephanie, R, Ms.,	al) or Full C	Organization Name	Date of Receipt					
Ν	Aailing Address 740 Parkins Mill Rd.	04 / D D / Y Y Y Y 2019							
	City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-826039 Amount of Each Receipt this Period					
	EC ID number of contributing ederal political committee.	С		115.39					
3	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item					
Ē	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.73]					
su	BTOTAL of Receipts This Page (optional)			346.17					

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 OF 108 (check only one) I1a I1a 11b I3 14
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Full Name of Individual (Last, First, Middle Initial) of A. James, Stephanie, R, Ms.,			Organization Name	Date of Receipt
	Mailing Address 740 Parkins Mill Rd.			04 / D D / Y Y Y Y 2019
	City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-826563 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]
Full Name of Individual (Last, First, Middle Initial) or B. Key, David, F, Mr.,			Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way	02 08 2019		
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-113405 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.79]
— C	Full Name of Individual (Last, First, Middle Initia Key, David, F, Mr.,	al) or Full C	Organization Name	Date of Receipt
•.	Mailing Address 1750 Eliza Way	02 22 2019		
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-327774 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 307.72]
s	UBTOTAL of Receipts This Page (optional)			▶ 269.25

	-			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 OF 108 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC)		
Α.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way			03 / D D / Y Y Y Y 03 08 2019
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-521956 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.65	
в.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way			03 22 2019
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-540447 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) hior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.58	
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	ial) or Full C	Organization Name	Date of Receipt
-	Mailing Address 1750 Eliza Way			04 05 / Y Y Y Y 04 05
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-826029 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 538.51	
s	UBTOTAL of Receipts This Page (optional)			230.79

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 OF 108 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Key, David, F, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 1750 Eliza Way			04 / D D / Y Y Y Y 04 19 2019
	City	State PA	Zip Code	Transaction ID : A2019-826592
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Select Medical Corporation		ior Vice President	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		615.44]
	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	rganization Name	Data of Descript
в.	Mailing Address 2409 W Bayberry Dr			Date of Receipt
	Maining Address 2409 W Bayberry Dr			01 25 2019
	City	State	Zip Code	Transaction ID : A2019-45772
	Harrisburg	PA	17112-1040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		230.78]
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr			02 / D D / Y Y Y Y 02 / 08 / 2019
	City Harrisburg	State PA	Zip Code 17112-1040	Transaction ID : A2019-113390
			17112-1040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	
	UBTOTAL of Receipts This Page (optional)			307.71

SUBTOTAL of Receipts This Page (optional)		 	9		 ,	,		307	7.71	
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TOTAL This Period (last page this line number only)		 	7	_	 		_			_

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 39 OF 108 (check only one) 11a 11a 11b 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
Α.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organi	zation Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr				02 / D / Y Y Y Y 22 2019
	City Harrisburg	State PA		Zip Code 17112-1040	Transaction ID : A2019-327759 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) ce President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	to-Date ▼ 461.56	
В.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organi	zation Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr				03 08 2019
	City Harrisburg	State PA		Zip Code 17112-1040	Transaction ID : A2019-521941 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Senior Vice President			Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	to-Date ▼ 576.95	
с.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organi	zation Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr				03 / D D / Y Y Y Y 03 22 2019
	City Harrisburg	State PA		Zip Code 17112-1040	Transaction ID : A2019-540432 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) ce President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year	to-Date ▼ 692.34	
s	UBTOTAL of Receipts This Page (optional)			•••••	346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 OF 108 (check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr	1-		04 / D D / Y Y Y Y Y 2019
	City Harrisburg	State PA	Zip Code 17112-1040	Transaction ID : A2019-826014 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73]
B	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organization Name	Date of Receipt
υ.	Mailing Address 2409 W Bayberry Dr			04 19 2019
	City Harrisburg	State PA	Zip Code 17112-1040	Transaction ID : A2019-826577 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Lewandowski, Bernard, , Mr.,	al) or Full C	Organization Name	Date of Receipt
•••	Mailing Address 26 Joseph Drive			01 / 25 / Y Y Y Y 2019
	City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-45746 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78]
s	UBTOTAL of Receipts This Page (optional)			346.17

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 41 OF 108 (check only one) 11a 11b 11c 12
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC)		
<u>А.</u>	Full Name of Individual (Last, First, Middle Init Lewandowski, Bernard, , Mr.,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 26 Joseph Drive			M M / D D / Y
	City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-113404 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17]
В.	Full Name of Individual (Last, First, Middle Init Lewandowski, Bernard, , Mr.,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 26 Joseph Drive			02 22 2019
	City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-327773 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461,56]
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Lewandowski, Bernard, , Mr.,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 26 Joseph Drive			03 / D D / Y Y Y Y 03 08 2019
	City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-521955 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.95]
	UBTOTAL of Receipts This Page (optional)			346.17

SUBTOTAL of Receipts This Page (optional)	•									0.17	
SUBTOTAL OF RECEIPTS THIS T Age (Optional)	·····	the second s		y			y	1.0			
			_	_	_	_	_	-	_	_	
TOTAL This Period (last page this line number only)	•										
TOTAL THIS I CHOU (last page this line humber only)				- 7		-	-			100	

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 OF (check only one) 11a 11b 11c 12 13 14 15 16 16
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Select Medical Corporation F	PAC		
Full Name of Individual (Last, First, Middle Lewandowski, Bernard, , Mr., Mailing Address 26 Joseph Drive	Initial) or Full Org	anization Name	Date of Receipt
City	State	Zip Code	Transaction ID : A2019-540446
Boiling Springs	PA	17007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
Select Medical Corporation	Senior	Vice President	_
Receipt For:	Aggregate Ye	ear-to-Date 🔻	
Primary General Other (specify) ▼		692.34	1

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lewandowski, Bernard, , Mr., Date of Receipt Mailing Address 26 Joseph Drive Μ 04 05 2019 City Zip Code State Transaction ID : A2019-826028 **Boiling Springs** PA 17007 Amount of Each Receipt this Period FEC ID number of contributing С 115.39 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Select Medical Corporation Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 807.73 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Lewandowski, Bernard, , Mr., Date of Receipt Mailing Address 26 Joseph Drive M M / D D 2010

108

City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-826591 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.39
Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify)		ation (for Individual) Vice President ear-to-Date ▼ 923.12	Memo Item
SUBTOTAL of Receipts This Page (optiona			346.17

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 OF 108 (check only one) Image: Check
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Initi Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			M M / D D / Y Y Y Y 03 15 2019
	City	State	Zip Code	Transaction ID : A2019-605075
	Destin	FL	32541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Operations	Memo Item
	Receipt For:	I	•	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.82]
_	Full Name of Individual (Last, First, Middle Init	ial) or Full C	organization Name	
В.	Lindley, Lauren, B, Ms.,			Date of Receipt
	Mailing Address 36 Indian Bayou Drive			03 / D D / Y Y Y Y 2019
	City	State	Zip Code	Transaction ID : A2019-605070
	Destin	FL	32541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.29]
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			M M / D D / Y Y Y Y 04 12 2019
	City Destin	State FL	Zip Code 32541	Transaction ID : A2019-745640 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Operations	Memo Item
	Receipt For:	I	Year-to-Date ▼	
	Primary General Other (specify)		307.76]
s	UBTOTAL of Receipts This Page (optional)			115.41

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 OF 108 (check only one) Image: Check
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Init Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			04 / D D / Y Y Y Y 04 26 2019
	City Destin	State FL	Zip Code 32541	Transaction ID : A2019-826051 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.23]
В.	Full Name of Individual (Last, First, Middle Init Malatesta, Michael, F, Mr., Mailing Address 4145 Serenity Street	ial) or Full C	organization Name	Date of Receipt
	City Schwenksville	State PA	Zip Code 19473	01 25 2019 Transaction ID : A2019-45739 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78]
с.	Full Name of Individual (Last, First, Middle Init Malatesta, Michael, F, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			02 08 / Y Y Y Y 02 08 2019
	City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-113397 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) Select Medical Corporation			upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17]
s	UBTOTAL of Receipts This Page (optional)			269.25

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 OF 108 (check only one) Image: Check only one in the image: Check only one in the image: Check on its in the image: Check on its interval in the imag
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Malatesta, Michael, F, Mr.,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			02 / D D / Y Y Y Y Y 02 22 2019
	City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-327766 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56]
в.	Full Name of Individual (Last, First, Middle Initia Malatesta, Michael, F, Mr.,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			03 / D D / Y Y Y Y 03 08 2019
	City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-521948 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95]
с.	Full Name of Individual (Last, First, Middle Initia Malatesta, Michael, F, Mr.,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			03 / D D / Y Y Y Y Y 22 2019
	City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-540439 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34]
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SCHEDULE A (FEC	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 OF 108 (check only one) I1a 11b 11c 12 13 14 15 16 17
or for commercial purposes, or	ther than using the name and a		erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (Ir Select Medical Co			
Full Name of Individual (La A. Malatesta, Michael, F, M	st, First, Middle Initial) or Full O Mr.,	rganization Name	Date of Receipt
Mailing Address 4145 Sere	nity Street		M M / D D / Y Y Y Y Y 04 05 2019
City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-826021 Amount of Each Receipt this Period
FEC ID number of contribu federal political committee.	ting		115.39
Name of Employer (for Indi Select Medical Corporation	,	upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary Ger Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73]
B. Malatesta, Michael, F Mailing Address 4145 Seree		rganization Name	Date of Receipt
City Schwenksville FEC ID number of contribu	ting C	Zip Code 19473	04 19 2019 Transaction ID : A2019-826584 Amount of Each Receipt this Period 115.39
federal political committee. Name of Employer (for Indi Select Medical Corporation	ividual) Occ	upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary Ger Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 923.12	
c. Marshall, Christoph		rganization Name	Date of Receipt
Mailing Address 4966 Cline			01 / D D / Y Y Y Y 01 25 2019
City Export	State PA	Zip Code 15632	Transaction ID : A2019-45774 Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.	ting		115.39
Name of Employer (for Indi Select Medical Corporation Receipt For:	Sen	upation (for Individual) ior Vice President	Memo Item
	neral Aggregate	Year-to-Date ▼ 230.78]
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Α.	Full Name of Individual (Last, First, Middle Initia Marshall, Christopher, L, Mr.,	al) or Full C	Organization Name	Date of Receipt							
	Mailing Address 4966 Cline Hollow Road			02 08 / Y Y Y Y 02 08 2019							
	City Export	State PA	Zip Code 15632	Transaction ID : A2019-113392 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item							
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В.	Full Name of Individual (Last, First, Middle Initia Marshall, Christopher, L, Mr.,	al) or Full C	Organization Name	Date of Receipt							
	Mailing Address 4966 Cline Hollow Road	02 22 2019									
	City Export	State PA	Zip Code 15632	Transaction ID : A2019-327761 Amount of Each Receipt this Period							
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	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item							
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<u> </u>	Full Name of Individual (Last, First, Middle Initia Marshall, Christopher, L, Mr.,	al) or Full C	Organization Name	Date of Receipt							
	Mailing Address 4966 Cline Hollow Road			03 / D / Y Y Y Y 2019							
	City Export	State PA	Zip Code 15632	Transaction ID : A2019-521943 Amount of Each Receipt this Period							
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Α.	Full Name of Individual (Last, First, Middle In Marshall, Christopher, L, Mr.,	itial) or Full C	Drgar	nization Name		Date o	f Re	eceipt									
	Mailing Address 4966 Cline Hollow Road							03 22 2019									
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	Mailing Address 4966 Cline Hollow Road							05	/ Y	y y 2019	Y						
	City	State	Transaction ID : A2019-826016														
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	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) √ice President		М	lemo	tem									
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•••	Mailing Address 4966 Cline Hollow Road					M M	_	19	/ Y	2019	Y						
	City	State		Zip Code		Trans	sact	ion ID :	A2019-82	6579							
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	Name of Employer (for Individual)		•	ion (for Individual)		N	lemo	o Item									
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)						
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC								
<u> </u>	Full Name of Individual (Last, First, Middle Initia McLain, Cynthia, G, Mrs.,	Date of Receipt							
	Mailing Address 1120 South Albert Pike								
	Fort Smith	State AR	Zip Code 72903	Transaction ID : A2019-45750 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation	upation (for Individual) e President	Memo Item						
	Receipt For: Primary General Other (specify) ▼								
в.	Full Name of Individual (Last, First, Middle Initia McLain, Cynthia, G, Mrs.,	Date of Receipt							
	Mailing Address 1120 South Albert Pike	02 / D D / Y Y Y Y Y 02 08 2019							
	City Fort Smith	State AR	Zip Code 72903	Transaction ID : A2019-113368 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 346.17						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia McLain, Cynthia, G, Mrs.,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 1120 South Albert Pike			02 / Y Y Y Y 02 22 2019					
	City Fort Smith	State AR	Zip Code 72903	Transaction ID : A2019-327777 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item					
	Receipt For: Primary General Other (specify)								
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)									
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia McLain, Cynthia, G, Mrs.,	al) or Full C	Drgar	nization Name	Date of Receipt								
	Mailing Address 1120 South Albert Pike				03 / D D / Y Y Y Y 03 08 2019								
	City	State		Zip Code	Transaction ID : A2019-521959								
	Fort Smith	AR		72903	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident	Memo Item								
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		-	576.95									
В.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	al) or Full C	Drgar	nization Name	Date of Receipt								
	Mailing Address 208 Woodside Avenue	•											
	City Narberth	State PA		Zip Code 19072	Transaction ID : A2019-45738 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) Vice President of Operations	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 230.78									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	al) or Full C	Drgar	nization Name	Date of Receipt								
	Mailing Address 208 Woodside Avenue				02 / D D / Y Y Y Y 02 / 08 / 2019								
	City Narberth	State PA		Zip Code 19072	Transaction ID : A2019-113396 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) /ice President of Operations	Memo Item								
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 208 Woodside Avenue			02 / 22 2019								
	City	State PA	Zip Code 19072	Transaction ID : A2019-327765								
	Narberth		19072	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item								
	Select Medical Corporation	Ser	nior Vice President of Operations									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		461.56									
В.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	ll) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 208 Woodside Avenue	03 08 2019										
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-521947 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President of Operations	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
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С.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	ll) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 208 Woodside Avenue			M M / D D / Y Y Y Y 03 22 2019								
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-540438								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 115.39								
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item								
	Select Medical Corporation Receipt For:	I	nior Vice President of Operations									
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s) (c			NUI NUI	MBER: e)	PAG	ìΕ	52 O	F 108				
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Α.	Full Name of Individual (Last, First, Middle In McNulty, James, , Mr.,	itial) or Full C	Organization Name	1	Date of Receipt										
	Mailing Address 208 Woodside Avenue						05	/ Y		2019	Y				
	City	State	Zip Code	04 05 2019 Transaction ID : A2019-826020											
	Narberth	PA	19072		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39											
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President of Operations		М	emo	ltem								
	Receipt For:		Year-to-Date ▼												
	Primary General Other (specify) ▼	807.73]												
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McNulty, James, , Mr.,						ceipt								
	Mailing Address 208 Woodside Avenue		м м 04	/	D D D 19	/ Y		019	Y						
	City	State	Zip Code	Transaction ID : A2019-826583											
	Narberth	PA	19072	_ /	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С	115.39												
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President of Operations		М	emo	ltem								
	Receipt For:	Aggregate	Year-to-Date V												
	Other (specify)		923.12]											
<u></u> с.	Full Name of Individual (Last, First, Middle In Mullin, Thomas, P, Mr.,	itial) or Full C	Organization Name		Date o	f Red	ceipt								
-	Mailing Address 215 St James Court				м м 01	/	25	/ Y		019	Y				
	City	State	Zip Code		Trans	sacti	on ID :	A2019-4	457	52					
	Mechanicsburg	PA	17050	/	Amoun	t of I	Each R	eceipt th	nis	Period					
	FEC ID number of contributing federal political committee.	С			115.39										
	Name of Employer (for Individual)		upation (for Individual)		Memo Item										
	Select Medical Corporation Receipt For:		ef Operating Officer												
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)					
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC						
Α.	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court	-		02 08 / Y Y Y Y 2019			
	City	State	Zip Code	Transaction ID : A2019-113370			
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) of Operating Officer	Memo Item			
	Receipt For:	Aggregate	Year-to-Date V				
	Primary General Other (specify) ▼		346.1	17			
В.	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court	02 22 2019					
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-327779 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ief Operating Officer	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	56			
<u> </u>	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court			03 / D D / Y Y Y Y Y 2019			
	City	State PA	Zip Code 17050	Transaction ID : A2019-521961			
	FEC ID number of contributing	C	17050	Amount of Each Receipt this Period			
	federal political committee.	U					
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ef Operating Officer	Memo Item			
	Receipt For:	1	Year-to-Date ▼				
	Primary General Other (specify)		576.9	95			
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC						
Α.	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court			03 / D D / Y Y Y Y 22 2019			
	City	State	Zip Code	Transaction ID : A2019-540451			
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) of Operating Officer	Memo Item			
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼		692.34				
В.	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court	04 05 2019					
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-826033 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ief Operating Officer	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.7	3			
<u> </u>	Full Name of Individual (Last, First, Middle Initia Mullin, Thomas, P, Mr.,	al) or Full C	Drganization Name	Date of Receipt			
	Mailing Address 215 St James Court	-		04 / D D / Y Y Y Y 2019			
	City	State PA	Zip Code 17050	Transaction ID : A2019-826596			
	FEC ID number of contributing		17050	Amount of Each Receipt this Period			
	federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ef Operating Officer	Memo Item			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)										
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Α.	Full Name of Individual (Last, First, Middle Init Mumma, Michael, J, Mr.,	Date of Receipt										
	Mailing Address 5782 Stillwell Court			03 22 2019								
	City	State	Zip Code	Transaction ID : A2019-540444								
	Harrisburg	PA	17112	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		38.47								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Select Medical Corporation		e President									
	Receipt For:		Year-to-Date ▼	-								
	Primary General	Ayyreyale										
	Other (specify) V		230.82									
	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Organization Name									
В.	Mumma, Michael, J, Mr.,			Date of Receipt								
	Mailing Address 5782 Stillwell Court	04 / D D / Y Y Y Y Y 02019										
	City	State	Zip Code	Transaction ID : A2019-826026								
	Harrisburg	PA	17112	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		38.47								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.29									
с.	Full Name of Individual (Last, First, Middle Init Mumma, Michael, J, Mr.,	ial) or Full C	Organization Name	Date of Receipt								
	Mailing Address 5782 Stillwell Court			M M / D D / Y Y Y Y 04 19 2019								
	City	State	Zip Code	Transaction ID : A2019-826589								
	Harrisburg	PA	17112	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		38.47								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Select Medical Corporation		President									
	Receipt For:		Year-to-Date ▼	-								
	Primary General	Ayyreyale										
	Other (specify)		307.76	1								
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 OF 108 (check only one) 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) Select Medical Corporation PA	٨C		
A. Naselli Jr., Francis, P, Mr., Mailing Address 655 North Heilbron Drive	nitial) or Full C	Organization Name	Date of Receipt
City Media	State PA	Zip Code 19063	01 18 2019 Transaction ID : A2019-45778 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	Reg	upation (for Individual) gional Vice President Year-to-Date ▼ 230.78	Memo Item
B. Full Name of Individual (Last, First, Middle In Naselli Jr., Francis, P, Mr., Mailing Address 655 North Heilbron Drive	nitial) or Full C	Organization Name	Date of Receipt
City Media FEC ID number of contributing federal political committee.	State PA	Zip Code 19063	Transaction ID : A2019-101430 Amount of Each Receipt this Period
Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	Re	upation (for Individual) gional Vice President Year-to-Date ▼ , 346.17	Memo Item
C. Full Name of Individual (Last, First, Middle In Naselli Jr., Francis, P, Mr., Mailing Address 655 North Heilbron Drive	nitial) or Full C	Organization Name	Date of Receipt
City Media FEC ID number of contributing federal political committee.	State PA	Zip Code 19063	02 15 2019 Transaction ID : A2019-278284 Amount of Each Receipt this Period 115.39
Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary Other (specify)	Reg	upation (for Individual) jional Vice President Year-to-Date ▼ 461.56	Memo Item
SUBTOTAL of Receipts This Page (optional)			346.17

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 OF 108 (check only one) Image: Check
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive	Chata	Zin Oode	03 / D D / Y Y Y Y 01 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-335146 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	
в.	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive	04-44-	7.0.00	03 / D D / Y Y Y Y 15 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-605074 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692,34	
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive			03 / D D / Y Y Y Y Y 29 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-605069 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) jional Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.73	
s	UBTOTAL of Receipts This Page (optional)			▶ 346.17

Other (specify)

nage# 202009259284968157								
CHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 OF 108 (check only one) 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions et to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Select Medical Corporation P	PAC							
Full Name of Individual (Last, First, Middle Naselli Jr., Francis, P, Mr.,	e Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 655 North Heilbron Drive								
City Media	State PA	Zip Code 19063	04 12 2019 Transaction ID : A2019-745639 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.39					
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) gional Vice President	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]					
Full Name of Individual (Last, First, Middle Naselli Jr., Francis, P, Mr.,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 655 North Heilbron Drive	State	Zip Code	04 / D D / Y Y Y Y Y 26 2019					
Media	PA	19063	Transaction ID : A2019-826050 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.39					
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) gional Vice President	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.51]					
Full Name of Individual (Last, First, Middle Nichols, Gregory, C, Mr.,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 303 Highpointe Ridge	Ctata	Zin Code	02 08 2019 Transition ID 40000 440070					
City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-113372 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.93					
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						

307.71 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)...... _____ 100

230.79

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 OF 108 (check only one) Image: Check only one (Check only one) Image: Check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge			02 22 2019
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-327781 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 307.72]
В.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge			03 08 2019
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-521963 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.65]
<u> </u>	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	Organization Name	Date of Receipt
•••	Mailing Address 303 Highpointe Ridge			03 / ²² / ^Y Y Y Y 2019
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-540453 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.58]
s	UBTOTAL of Receipts This Page (optional)			230.79

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 OF 108 (check only one) I1a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	ll) or Full C	Organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge	1-		04 / D D / Y Y Y Y 2019
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-826035 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.51]
в.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	ll) or Full C	Organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge	04 19 2019		
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-826598 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 615.44]
— с.	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	ll) or Full C	Organization Name	Date of Receipt
-	Mailing Address 24 3rd St	1		01 25 / Y Y Y Y 01 25 2019
	City Aspinwall	State PA	Zip Code 15215-2904	Transaction ID : A2019-45757 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78]
s	UBTOTAL of Receipts This Page (optional)			269.25

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 OF 108 (check only one) Image: state st
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 24 3rd St			02 08 / Y Y Y Y 02 08 2019
	City	State	Zip Code	Transaction ID : A2019-113375
	Aspinwall	PA	15215-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For:			
	Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼		346.17	
В.	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 24 3rd St	02 22 2019		
	City	State	Zip Code	
	Aspinwall	PA	15215-2904	Transaction ID : A2019-327784 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	
<u> </u>	Full Name of Individual (Last, First, Middle Initian Noro, Sharon, A, Mrs.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 24 3rd St			03 / D D / Y Y Y Y 03 08 2019
	City Aspinwall	State PA	Zip Code 15215-2904	Transaction ID : A2019-521966 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual)		С		115.39
			cupation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	_
		Aggregate	Year-to-Date V	
	Other (specify)		576.95	1
s	UBTOTAL of Receipts This Page (optional)			346.17

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SCHEDULE A (FEC Form 3X)	
ITEMIZED RECEIPTS	Us for De

se separate schedule(s)

FOR LINE NUMBER:

PAGE 62 OF

108

			Use separate schedule(s)	(C	(check only one)						
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		¥ 11a 13		11b 14	11c		12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	itements ma	ay not be sold or used by any pe ddress of any political committee	rson to s	for the	e pui ontril	rpose of outions	f soliciti	ng co uch cc	ntributi	ions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC										
Α.	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	al) or Full O	rganization Name		Date of	of Re	eceipt				
	Mailing Address 24 3rd St				M 03	M	D 22			019	Y
	City Aspinwall	State PA	Zip Code 15215-2904	_			t ion ID : Each F				
	FEC ID number of contributing federal political committee.	С			<u> </u>		-g- 1			115.3	9
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President		Ν	Nem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34								
— B	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	al) or Full O	rganization Name		Date of	of Re	eceipt				
2.	Mailing Address 24 3rd St				04		05			у 019	Y
	City Aspinwall	State PA	Zip Code 15215-2904	_			i on ID : Each F				
	FEC ID number of contributing federal political committee.	С			Amour			heceipt		115.3	9
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President		Ν	Nem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73								
с.	Full Name of Individual (Last, First, Middle Initia Noro, Sharon, A, Mrs.,	al) or Full O	rganization Name		Date of	of Re	eceipt				
	Mailing Address 24 3rd St				^M 04		D 19			019 [°]	Ŷ
	City Aspinwall	State PA	Zip Code 15215-2904	_			tion ID Each F				
	FEC ID number of contributing federal political committee.	С					y .	. ,		115.3	9
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President		N	Vlem	o Item				
	Receipt For: Primary General Other (specify)	Aggregate									
s	UBTOTAL of Receipts This Page (optional)		•				,	. ,		346.1	7
Т	OTAL This Period (last page this line number of	nly)	·····							1.40	

S	CHEDULE A (FEC Form 3X)		[FOR LINE NUMBER: PAGE 63 OF 108
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Initi Ortenzio, Rocco, A, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 7 Westwind Dr			01 / Y Y Y Y Y 01 25 2019
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-45768 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e-Chairman	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.62]
в.	Full Name of Individual (Last, First, Middle Initi Ortenzio, Rocco, A, Mr., Mailing Address 7 Westwind Dr	al) or Full C	rganization Name	Date of Receipt
	City Lemoyne	State PA	Zip Code 17043-1234	02 08 2019 Transaction ID : A2019-113386 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ə-Chairman	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.93]
с.	Full Name of Individual (Last, First, Middle Initi Ortenzio, Rocco, A, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 7 Westwind Dr			02 / D D / Y Y Y Y Y 02 22 2019
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-327755 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) -Chairman	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 769.24]
s	UBTOTAL of Receipts This Page (optional)			576.93

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 OF 108 (check only one) Image: Check						
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA	C								
Α.	Full Name of Individual (Last, First, Middle Ini Ortenzio, Rocco, A, Mr.,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 7 Westwind Dr			03 / D D / Y Y Y Y Y 03 08 2019						
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-521937 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e-Chairman	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.55]						
В.	Full Name of Individual (Last, First, Middle Ini Ortenzio, Rocco, A, Mr.,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 7 Westwind Dr			M M / D / Y						
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-540428 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e-Chairman	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.86]						
<u></u> с.	Full Name of Individual (Last, First, Middle Ini Ortenzio, Rocco, A, Mr.,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 7 Westwind Dr	1		04 / D D / Y Y Y Y 05 / 2019						
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-826010 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.31						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) -Chairman	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1346.17]						
Γ				576.93						

	SUBTOTAL of Docounte This Doco (ontional)										0.00	
I	SUBTOTAL of Receipts This Page (optional)	-	1	1	y	1	1		1			
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	TOTAL This Period (last page this line number only)	_			-			7			-	

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S	CHEDULE A (FEC Form 3X)			Jse separate schedule(s)	FOR LINE NUMBER: PAGE 65 OF 108 (check only one)							
IT	EMIZED RECEIPTS			or each category of the								
			[Detailed Summary Page	X 11a 11b 11c 12							
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	y information copied from such Reports and Sta for commercial purposes, other than using the											
\mathbb{N}	NAME OF COMMITTEE (In Full)											
\backslash	Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Ortenzio, Rocco, A, Mr.,	al) or Full C	Drgar	nization Name	Date of Receipt							
	Mailing Address 7 Westwind Dr				04 / D D / Y Y Y Y 2019							
	City	State		Zip Code	Transaction ID : A2019-826573							
	Lemoyne	PA		17043-1234	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			192.31							
	Name of Employer (for Individual)	Occ	cupat	ion (for Individual)	Memo Item							
	Select Medical Corporation	Vice	e-Ch	airman								
	Receipt For:	Aggregate	Yea	r-to-Date ▼								
	Primary General				1							
	Other (specify) v	L	7	1538.48								
B	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Orgai	nization Name	Date of Receipt							
υ.	Mailing Address 21723 E Rowland Cir											
		01 25 2019										
	City	State		Zip Code	Transaction ID : A2019-45767							
	Aurora	со		80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing	\mathbf{c}										
	federal political committee.	C	-		115.39							
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) esident	Memo Item							
	Receipt For:	Aggregate	Yea	r-to-Date ▼								
	Primary General			000 70	1							
	Other (specify) v	L	,	230.78	1							
c.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Drgai	nization Name	Date of Receipt							
	Mailing Address 21723 E Rowland Cir				02 08 2019							
	City	State		Zip Code	Transaction ID : A2019-113385							
	Aurora	CO		80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing											
	federal political committee.	C			115.39							
	Name of Employer (for Individual)	Occ	cupat	ion (for Individual)	Memo Item							
	Select Medical Corporation	Vice	e Pre	sident								
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	Primary General	00 0			1							
	Other (specify)	L	-	346.17	1							
					423.09							
18	UBTOTAL of Receipts This Page (optional)			•••••••	+ 423.03							

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 66 OF 108 (check only one)							
IT	EMIZED RECEIPTS		for each category of the	४ 11a ☐ 11b ☐ 11c ☐ 12							
			Detailed Summary Page	13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the										
\square	NAME OF COMMITTEE (In Full)										
	Select Medical Corporation PAC										
Α.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 21723 E Rowland Cir			02 22 / Y Y Y Y 2019							
	City	State CO	Zip Code 80016-3608	Transaction ID : A2019-327794							
	Aurora		80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item							
	Receipt For:										
	Primary General	Ayyreyale	e Year-to-Date ▼								
	Other (specify) V	L	461.56	1							
в.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 21723 E Rowland Cir			03 08 2019							
	City	State	Zip Code	Transaction ID : A2019-521936							
	Aurora	СО	80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item							
	Receipt For:		e Year-to-Date ▼	_							
	Primary General			1							
	Other (specify)		576.95								
C.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 21723 E Rowland Cir			03 / D D / Y Y Y Y 22 2019							
	City	State CO	Zip Code	Transaction ID : A2019-540466							
	Aurora		80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
Name of Employer (for Individual) Select Medical Corporation			cupation (for Individual) e President	Memo Item							
	Receipt For:										
	Primary General	Ayyregate	e Year-to-Date ▼								
	Other (specify)		692.34	1							
5	UBTOTAL of Receipts This Page (optional)			346.17							

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS			Jse separate schedule(s)	FOR LINE NUMBER: PAGE 67 OF 108 (check only one)								
	EMIZED RECEIPTS			or each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12								
				at he cold or wood by only n	13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Orgar	ization Name	Date of Receipt								
	Mailing Address 21723 E Rowland Cir				04 / D D / Y Y Y Y 2019								
	City	State CO		Zip Code	Transaction ID : A2019-826048								
	Aurora			80016-3608	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident	Memo Item								
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		Ŧ	807.73									
— B	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Orgar	ization Name	Date of Receipt								
	Mailing Address 21723 E Rowland Cir				04 19 2019								
	City	State		Zip Code	Transaction ID : A2019-826572								
	Aurora	CO		80016-3608	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident	Memo Item								
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<u> </u>	Full Name of Individual (Last, First, Middle Initia Pennacchia, Raymond, J, Mr.,	al) or Full C	Orgar	ization Name	Date of Receipt								
	Mailing Address 6 Cold Spring Lane				01 / D D / Y Y Y Y Y 2019								
	City Media	State PA		Zip Code 19063	Transaction ID : A2019-45737								
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	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) sident of Marketing Senior	Memo Item								
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SCHEDULE A	(FEC Form 3X)	
ITEMIZED REC	EIPTS	

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FOR LINE NUMBER:

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PAGE 68 OF

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	Mailing Address 6 Cold Spring Lane				02 08 2019 Transaction ID : A2019-113395												
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	City	State		Zip Code	Transaction ID : A2019-327764												
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 OF 108 (check only one) Image: state st
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	Mailing Address 7915 Glade Hill Ct			M M / D D / Y Y Y Y 03 22 2019
	City Dallas	State TX	Zip Code 75218	Transaction ID : A2019-540463 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	CEO	upation (for Individual) D/Administrator Year-to-Date ▼ 230.82	Memo Item
в.	Full Name of Individual (Last, First, Middle Initi Polo, Fabian, E, Mr., Mailing Address 7915 Glade Hill Ct	al) or Full C	Organization Name	Date of Receipt
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	Mailing Address 7915 Glade Hill Ct			04 / D D / Y Y Y Y Y 2019
	City Dallas	State TX	Zip Code 75218	Transaction ID : A2019-826569 Amount of Each Receipt this Period
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	Mailing Address 20528 Lagoona Drive				03 / D D / Y Y Y Y 22 2019							
	City	State		Zip Code	Transaction ID : A2019-540452							
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	Name of Employer (for Individual)	Occ	upa	tion (for Individual)	Memo Item							
	Select Medical Corporation	Vice	e Pr	esident								
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Primary General Other (specify) ▼		-	230.82]							
В.	Full Name of Individual (Last, First, Middle Initia Rhodes, Chandelle, L, Ms.,	ll) or Full C	Drga	nization Name	Date of Receipt							
	Mailing Address 20528 Lagoona Drive	04 05 / Y Y Y Y 094 05										
	City	State		Zip Code	Transaction ID : A2019-826034							
	Cornelius	NC		28031	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			38.47							
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) resident	Memo Item							
Receipt For: Aggre Primary General Other (specify) ▼				ar-to-Date ▼ 269.29								
с.	Full Name of Individual (Last, First, Middle Initia Rhodes, Chandelle, L, Ms.,	ll) or Full C	Drga	nization Name	Date of Receipt							
	Mailing Address 20528 Lagoona Drive				04 / D D / Y Y Y Y 2019							
	City	State NC		Zip Code	Transaction ID : A2019-826597							
	Cornelius			28031	Amount of Each Receipt this Period	_						
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s	UBTOTAL of Receipts This Page (optional)				115.41	٦						

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 OF 108 (check only one) 11a 11b 11c 12 X 11a 14 15 16 17								
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA											
Α.	Full Name of Individual (Last, First, Middle In Rusignuolo, Brian, R, Mr.,	itial) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 1339 Sconsett Way			01 25 2019								
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-45741 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.62]								
В.	Full Name of Individual (Last, First, Middle In Rusignuolo, Brian, R, Mr.,	tial) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 1339 Sconsett Way			02 08 / Y Y Y Y 2019								
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-113399 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
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C.	Full Name of Individual (Last, First, Middle In Rusignuolo, Brian, R, Mr., Mailing Address 1339 Sconsett Way	itial) or Full C	Drganization Name	Date of Receipt								
		Otata	Zin Oode	02 22 2019								
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-327768 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nor Vice President	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 769.24									

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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC													
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	Mailing Address 1339 Sconsett Way					м м 03	/ D	р / Ү 8	y y 2019	Ŷ				
	City State New Cumberland PA		Zip Code 17070		Transaction ID : A2019-521950 Amount of Each Receipt this Period									
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	Name of Employer (for Individual) Select Medical Corporation		upation (for Individation in the interview of the intervi	lual)		Me	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	961.55										
в.	Full Name of Individual (Last, First, Middle Initia Rusignuolo, Brian, R, Mr.,			Date of	Receipt									
	Mailing Address 1339 Sconsett Way	03 / D D / Y Y Y Y 22 2019												
	City New Cumberland	State PA	Zip Code 17070					: A2019-5 Receipt th						
	FEC ID number of contributing federal political committee.	ů l						1 1	192	31				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individuality in the second s	,		Me	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1153.86										
с.	Full Name of Individual (Last, First, Middle Initia Rusignuolo, Brian, R, Mr.,	al) or Full C	Organization Name			Date of	Receipt							
	Mailing Address 1339 Sconsett Way					^M 04	/ D	5 / Y	2019	Y				
	City New Cumberland	State PA	Zip Code 17070					: A2019-8 Receipt th		 				
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X 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) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rusignuolo, Brian, R, Mr., Α. Date of Receipt Mailing Address 1339 Sconsett Way 2019 04 19 City Zip Code State Transaction ID : A2019-826586 PA New Cumberland 17070 Amount of Each Receipt this Period FEC ID number of contributing С 192.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Vice President Select Medical Corporation Receipt For: Aggregate Year-to-Date ▼ Primary General 1538.48 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ruskan, Jeffrey, J, Mr., Date of Receipt Mailing Address 304 Beechwood Drive 01 25 2019 City State Zip Code Transaction ID : A2019-45765 VA Richmond 23229 Amount of Each Receipt this Period FEC ID number of contributing С 192.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Select Medical Corporation President Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 384.62 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ruskan, Jeffrey, J, Mr., Date of Receipt Mailing Address 304 Beechwood Drive М 02 08 2019 City State Zip Code Transaction ID : A2019-113383 VA Richmond 23229 Amount of Each Receipt this Period FEC ID number of contributing С 192.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Select Medical Corporation President Receipt For: Aggregate Year-to-Date ▼ Primary General 576.93 Other (specify) 576.93 SUBTOTAL of Receipts This Page (optional).....

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	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
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A.	Full Name of Individual (Last, First, Middle Ini Ruskan, Jeffrey, J, Mr.,	tial) or Full C	rganization Name	Date of Receipt								
	Mailing Address 304 Beechwood Drive			02 22 2019								
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-327792 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual)		upation (for Individual)	Memo Item								
	Select Medical Corporation Receipt For:		sident									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.24	1								
В.	Full Name of Individual (Last, First, Middle Ini Ruskan, Jeffrey, J, Mr.,	tial) or Full C	rganization Name	Date of Receipt								
	Mailing Address 304 Beechwood Drive			03 08 2019								
	City	State	Zip Code	Transaction ID : A2019-521934								
	Richmond	VA	23229	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.31								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		961.55]								
с.	Full Name of Individual (Last, First, Middle Ini Ruskan, Jeffrey, J, Mr.,	tial) or Full C	rganization Name	Date of Receipt								
	Mailing Address 304 Beechwood Drive			03 / D D / Y Y Y Y 22 2019								
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-540464								
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
			upation (for Individual) sident	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.86									
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE NUMBER: PAGE 76 OF 108 (check only one) Image: Check only one (Check only one) Image: Check only one) Image											
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr.,	l) or Full (Orgar	nization Name	Date of Receipt								
	Mailing Address 304 Beechwood Drive				04 05 2019								
	City Richmond	State VA		Zip Code 23229	Transaction ID : A2019-826046 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupat esider	ion (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	r-to-Date ▼ 1346.17									
Full Name of Individual (Last, First, Middle Initial) or F B. Ruskan, Jeffrey, J, Mr., Mailing Address 304 Beechwood Drive				nization Name	Date of Receipt								
					04 19 2019								
	City	State		Zip Code	Transaction ID : A2019-826570								
	Richmond	VA	_	23229	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			192.31								
	Name of Employer (for Individual) Select Medical Corporation		cupat eside	ion (for Individual) nt	Memo Item								
	Receipt For: Primary General	Aggregate	e Yea	r-to-Date ▼									
	Other (specify) V		4	1538,48									
C.	Full Name of Individual (Last, First, Middle Initia Sarfaty, Beth, R, Ms.,	l) or Full (Orgar	nization Name	Date of Receipt								
	Mailing Address 34 Wall Street				03 / D D / Y Y Y Y 22 2019								
	City West Long Branch	State NJ		Zip Code 07764	Transaction ID : A2019-540436								
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 38.47								
				ion (for Individual) cal Svcs & Quality Mgmt	Memo Item								
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 OF 108 (check only one) I1a 11b 11c 12 I3 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.		ial) or Full O	Organization Name	Date of Receipt
	Mailing Address 34 Wall Street			04 / D D / Y Y Y Y Y 04 05 2019
	City West Long Branch	State NJ	Zip Code 07764	Transaction ID : A2019-826018 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) Clinical Svcs & Quality Mgmt	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 269.29	
В.	Full Name of Individual (Last, First, Middle Initi Sarfaty, Beth, R, Ms.,	ial) or Full O	Organization Name	Date of Receipt
	Mailing Address 34 Wall Street			04 / Y Y Y Y 04 19 2019
	City West Long Branch	State NJ	Zip Code 07764	Transaction ID : A2019-826581 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) Clinical Svcs & Quality Mgmt	Memo Item
	Receipt For: Primary General		Year-to-Date ▼	1
	Other (specify) V	L	307.76	
c.	Full Name of Individual (Last, First, Middle Initi Schmidt, Megan, P, Ms.,	ial) or Full O	Organization Name	Date of Receipt
	Mailing Address 204 Forest Lane North	01-1-	7.0.0.1	01 / D D / Y Y Y Y 2019
	City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-45751 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation			upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78	
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and a	ay not be sold or used by any ddress of any political commit	v person for the purpose of soliciting contributions ttee to solicit contributions from such committee.							
Full Name of Individual (Last, First, Middl Schmidt, Megan, P, Ms., Mailing Address 204 Forest Lane North		Prganization Name	Date of Receipt 02 08 2019							
City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-113369 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.39							
Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	Vice	upation (for Individual) e President Year-to-Date ▼ 346.17	Memo Item							
Full Name of Individual (Last, First, Middl S. Schmidt, Megan, P, Ms., Mailing Address 204 Forest Lane North	e Initial) or Full C	rganization Name	Date of Receipt							
City	State	Zip Code	Transaction ID : A2019-327778							
Blountville	TN	37617	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.39							
Name of Employer (for Individual) Select Medical Corporation		Occupation (for Individual) Memo Item								
Receipt For:	Aggregate	Year-to-Date V								

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Schmidt, Megan, P. Ms.,

Other (specify)

. Schmidt, Megan, P, Ms.,		Date of Receipt				
Mailing Address 204 Forest Lane North		M M / D D / Y Y Y Y 03 08 2019				
City	State Zip Code	Transaction ID : A2019-521960				
Blountville	TN 37617	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	115.39				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Select Medical Corporation	Vice President					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 576.95					
SUBTOTAL of Receipts This Page (optional) ▶	346.17				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)										
	y information copied from such Reports and S for commercial purposes, other than using the			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	C										
Α.	Full Name of Individual (Last, First, Middle Ini Schmidt, Megan, P, Ms.,	tial) or Full C	Prganization Name	Date of Receipt								
	Mailing Address 204 Forest Lane North			03 / D D / Y Y Y Y Y 22 2019								
	City	State	Zip Code	Transaction ID : A2019-540450								
	Blountville	TN	37617	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Select Medical Corporation		e President									
	Receipt For:	Aggregate	Year-to-Date ▼	_								
	Primary General	riggroguto		1								
	Other (specify)		692.34									
	Full Name of Individual (Last, First, Middle Ini	tial) or Full C	organization Name									
В.	Schmidt, Megan, P, Ms.,			Date of Receipt								
	Mailing Address 204 Forest Lane North			04 / D D / Y Y Y Y 2019								
	City	State	Zip Code	Transaction ID : A2019-826032								
	Blountville	TN	37617	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item								
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	Primary General Other (specify) ▼		, 807.73]								
с.	Full Name of Individual (Last, First, Middle Ini Schmidt, Megan, P, Ms.,	tial) or Full C	organization Name	Date of Receipt								
	Mailing Address 204 Forest Lane North			M M / D D / Y Y Y Y 04 19 2019								
	City	State TN	Zip Code	Transaction ID : A2019-826595								
	Blountville		37617	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item								
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FEC Schedule A (Form 3X) Rev. 06/2016

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		fc	lse separate schedule(s) or each category of the letailed Summary Page	FOR LINE NUMBER: PAGE 80 OF 108 (check only one) Image: state stat
	y information copied from such Reports and Sta for commercial purposes, other than using the n				erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
Α.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	l) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 195 Honeybelle Oval				01 / D D / Y Y Y Y 25 2019
	City	State		Zip Code	Transaction ID : A2019-45775
	Chagrin Falls	ОН		44022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual)	Occ	cupati	on (for Individual)	Memo Item
	Select Medical Corporation	Ser	nior V	ice President	
	Receipt For:	Aggregate	e Yea	r-to-Date ▼	
	Primary General	00 0			1
	Other (specify) v		-	230.78	
_	Full Name of Individual (Last, First, Middle Initia	l) or Full C	Organ	ization Name	
В.		Date of Receipt			
	Mailing Address 195 Honeybelle Oval	02 08 2019			
	City	State		Zip Code	Transaction ID : A2019-113393
	Chagrin Falls	OH		44022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation			ion (for Individual) /ice President	Memo Item
	Receipt For:	Aggregate	e Year	r-to-Date ▼	
	Primary General Other (specify) ▼		<u>,</u>	346.17	1
с.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	l) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 195 Honeybelle Oval				02 22 2019
	City	State		Zip Code	Transaction ID : A2019-327762
	Chagrin Falls	OH		44022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual)		•	on (for Individual)	Memo Item
	Select Medical Corporation			ice President	_
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 81 OF 108 (check only one) X 11a 11b 11c 12 13 14 15 16 17
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
<u> </u>	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	Date of Receipt			
	Mailing Address 195 Honeybelle Oval				03 / D D / Y Y Y Y 03 08 2019
	City Chagrin Falls	State OH		p Code 44022	Transaction ID : A2019-521944 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼ 576.95	
в.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs., Mailing Address 195 Honeybelle Oval	al) or Full C)rganiza	ation Name	Date of Receipt
	City Chagrin Falls	State OH		p Code 14022	03 22 2019 Transaction ID : A2019-540435 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼ 692.34	
С.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	al) or Full C	rganiza	ation Name	Date of Receipt
	Mailing Address 195 Honeybelle Oval	1-			04 / D D / Y Y Y Y 2019
	City Chagrin Falls	State OH		p Code 4022	Transaction ID : A2019-826017 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to	o-Date ▼ 807.73	
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC)												
Α.	Full Name of Individual (Last, First, Middle Init Singer, Deborah, L, Mrs.,		Date o	f Re	ceipt									
	Mailing Address 195 Honeybelle Oval					04 19 2019								
	City Chagrin Falls	State OH		Zip Code 44022		Tran s Amoun				2019 ceipt				
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	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) /ice President		M	lemo	Item	I					
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В.	Full Name of Individual (Last, First, Middle Init Skinner, Gloria, J, Mrs.,	ial) or Full C	Orga	nization Name		Date o	f Re	ceipt						
	Mailing Address 1685 North 700 West			1		^M 01	1		25	/		019	Ŷ	
	City Columbus	State IN		Zip Code 47201		Trans Amoun		-			-	-		
	FEC ID number of contributing federal political committee.	С								9		115.	39	
	Name of Employer (for Individual) Select Medical Corporation			tion (for Individual) Vice President		M	lemo	Item	I					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 230.78]									
c.	Full Name of Individual (Last, First, Middle Init Skinner, Gloria, J, Mrs.,	ial) or Full C	Orga	nization Name		Date o	f Re	ceipt						
	Mailing Address 1685 North 700 West			1		^M 02	1	DO)8	/		019	Y	
	Columbus	State IN		Zip Code 47201		Tran: Amoun				2019 ceipt				
	FEC ID number of contributing federal political committee.	С				115.39								
	Name of Employer (for Individual) Select Medical Corporation	Occupation (for Individual) Senior Vice President					lemo	Item	I					
_	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 346.17]									

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		for each	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 83 OF 108 (check only one) Image: Check only one in the image: Check only one in the image: Check only one in the image: Check on the image:
	y information copied from such Reports and Sta for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			,	
A .	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Organization N	lame	Date of Receipt
	Mailing Address 1685 North 700 West				02 22 2019
	City Columbus	State IN	Zip Cod 47201	е	Transaction ID : A2019-327760 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for I nior Vice Pres	,	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	461.56	1
в.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Organization N	lame	Date of Receipt
-	Mailing Address 1685 North 700 West	03 08 2019			
	City Columbus	State IN	Zip Cod 47201	e	Transaction ID : A2019-521942 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for I nior Vice Pres	,	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	576.95	1
с.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Organization N	lame	Date of Receipt
	Mailing Address 1685 North 700 West				03 / D D / Y Y Y Y 22 2019
	City Columbus	State IN	Zip Cod 47201	e	Transaction ID : A2019-540433 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for I ior Vice Presi	,	Memo Item
	Receipt For: Primary General Other (specify)	692.34	1		
s	UBTOTAL of Receipts This Page (optional)				346.17

FEC Schedule A (Form 3X) Rev. 06/2016

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 OF 108 (check only one) 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 1685 North 700 West			04 05 / Y Y Y Y 2019
	City	State	Zip Code	Transaction ID : A2019-826015
	Columbus	IN	47201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73]
в.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	Date of Receipt		
	Mailing Address 1685 North 700 West	04 19 2019		
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-826578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12]
<u> </u>	Full Name of Individual (Last, First, Middle Initia Skinner, Jon, C, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 5200 Topaz Ct			01 25 2019
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-45762 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		eupation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78]
s	UBTOTAL of Receipts This Page (optional)			346.17

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	ITEMIZED RECEIPTS		CHEDULE A (FEC Form 3X) Use separate schedule(s) Use separate schedule(s)						
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12					
				13 14 15 16 17					
				person for the purpose of soliciting contributions e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA(
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	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr.,	Date of Receipt							
	Mailing Address 5200 Topaz Ct	02 08 2019							
	City	State	Zip Code	Transaction ID : A2019-113380					
-	Flower Mound	TX	75022-8143	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
i	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
	Select Medical Corporation		President						
	Receipt For:		Year-to-Date ▼						
	Primary General	Aggregate		-					
	Other (specify) V		346.17						
	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr.,	itial) or Full O	rganization Name	Date of Descript					
-	Mailing Address 5200 Topaz Ct	Date of Receipt							
	Maining Address 5200 Topaz Ct	02 22 2019							
i	City	State	Zip Code	Transaction ID : A2019-327789					
-	Flower Mound	ТХ	75022-8143	Amount of Each Receipt this Period					
	FEC ID number of contributing	0							
1	federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item					
l	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼		461.56	1					
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C.	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr.,	itial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 5200 Topaz Ct			03 / D D / Y Y Y Y 03 08 2019					
(City	State	Zip Code	Transaction ID : A2019-521971					
-	Flower Mound	TX	75022-8143	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
·	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item					
	Select Medical Corporation	Vice	President						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify)]							
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 OF 108 (check only one)
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA	C		
Α.	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr.,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 5200 Topaz Ct			03 / Y Y Y Y Y 22 2019
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-540461 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	
в.	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr., Mailing Address 5200 Topaz Ct	Date of Receipt		
	City Flower Mound	State TX	Zip Code 75022-8143	04 05 2019 Transaction ID : A2019-826043 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	
C.	Full Name of Individual (Last, First, Middle Ini Skinner, Jon, C, Mr.,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 5200 Topaz Ct			04 / D D / Y Y Y Y 04 19 2019
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-826567 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	
s	UBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)					
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	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;						
<u>к</u>	Full Name of Individual (Last, First, Middle Initi Sloterbeek, Meridell, , Mrs.,	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 164 E Dawn Dr			01 / Y Y Y Y 25 2019				
	City	State AZ	Zip Code	Transaction ID : A2019-45742				
	Tempe	AZ	85284-3160	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		115.39				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼		230.78	1				
— B	Full Name of Individual (Last, First, Middle Initi Sloterbeek, Meridell, , Mrs.,	al) or Full C	Organization Name	Date of Receipt				
υ.	Mailing Address 164 E Dawn Dr	02 08 2019						
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-113400 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		115.39				
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼		, 346.17]				
с.	Full Name of Individual (Last, First, Middle Initi Sloterbeek, Meridell, , Mrs.,	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 164 E Dawn Dr			02 / D D / Y Y Y Y 22 2019				
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-327769				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period				
	Name of Employer (for Individual)		upation (for Individual)	Memo Item				
	Select Medical Corporation	Vice	President					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify)		461.56]				
s	UBTOTAL of Receipts This Page (optional)			346.17				

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 88 OF

			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Staten for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Α.	Full Name of Individual (Last, First, Middle Initial) of Sloterbeek, Meridell, , Mrs., Mailing Address 164 E Dawn Dr	Date of Receipt								
	,	State AZ	Zip Code 85284-3160	03 08 2019 Transaction ID : A2019-521951						
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period						
	Name of Employer (for Individual) Select Medical Corporation Receipt For:	Vice I	pation (for Individual) President	Memo Item						
	Primary General Ag Other (specify) ▼	igregate Y	′ear-to-Date ▼ 576.95	1						
B.	Full Name of Individual (Last, First, Middle Initial) of Sloterbeek, Meridell, , Mrs.,	Date of Receipt								
	Mailing Address 164 E Dawn Dr	03 / D D / Y Y Y Y Y 22 2019								
	5	State AZ	Zip Code 85284-3160	Transaction ID : A2019-540442 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	ů l								
	Name of Employer (for Individual) Select Medical Corporation		pation (for Individual) President	Memo Item						
	Receipt For: Ag Primary General Other (specify) ▼	igregate Y	′ear-to-Date ▼ 692.34							
с.	Full Name of Individual (Last, First, Middle Initial) o Sloterbeek, Meridell, , Mrs.,	or Full Org	ganization Name	Date of Receipt						
	Mailing Address 164 E Dawn Dr			04 05 / Y Y Y Y 2019						
	,	State AZ	Zip Code 85284-3160	Transaction ID : A2019-826024 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			115.39						
	Name of Employer (for Individual) Select Medical Corporation	Vice F	pation (for Individual) President	Memo Item						
	Receipt For: Ag Primary General Other (specify)	igregate Y	/ear-to-Date ▼ 807.73							
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 OF 108 (check only one) Image: state st								
Ar	y information copied from such Reports and Sta	atements ma		erson for the purpose of soliciting contributions								
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
A .	Full Name of Individual (Last, First, Middle Initi Sloterbeek, Meridell, , Mrs.,	al) or Full C	Organization Name	Date of Receipt								
	Mailing Address 164 E Dawn Dr			04 / D D / Y Y Y Y Y 2019								
	City	State AZ	Zip Code	Transaction ID : A2019-826587								
	Tempe	AZ	85284-3160	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		eupation (for Individual) e President	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		923.12]								
В.	Full Name of Individual (Last, First, Middle Initi Streepy, Kurt, S, Mr.,	al) or Full C	Organization Name	Date of Receipt								
	Mailing Address 3128 Mattatha Drive			01 25 2019								
	City	State	Zip Code	Transaction ID : A2019-45745								
	Bloomington	IN	47401	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78]								
<u> </u>	Full Name of Individual (Last, First, Middle Initi Streepy, Kurt, S, Mr.,	al) or Full C	Organization Name	Date of Receipt								
	Mailing Address 3128 Mattatha Drive			02 08 / Y Y Y Y 2019								
	City	State	Zip Code	Transaction ID : A2019-113403								
	Bloomington	IN	47401	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item								
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s	UBTOTAL of Receipts This Page (optional)			346.17								

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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 90 OF 108 (check only one)
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	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 3128 Mattatha Drive			02 / D D / Y Y Y Y 22 2019
	City Bloomington	State IN	Zip Code 47401	Transaction ID : A2019-327772 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	
В.	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 3128 Mattatha Drive			M M / D / Y
	City Bloomington	State IN	Zip Code 47401	Transaction ID : A2019-521954 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) hior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	
<u> </u>	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 3128 Mattatha Drive			03 22 2019
	City Bloomington	State IN	Zip Code 47401	Transaction ID : A2019-540445 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34	
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 OF 108 (check only one) Image: 11a 11b 11c 12
	y information copied from such Reports and Sta for commercial purposes, other than using the r		ay not be sold or used by any	13 14 15 16 17 person for the purpose of soliciting contributions ee to solicit contributions from such committee.
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/	Full Name of Individual (Last, First, Middle Initia	u) or Full C	Irganization Name	
Α.	Streepy, Kurt, S, Mr.,		nganization Name	Date of Receipt
	Mailing Address 3128 Mattatha Drive			M M / D D / Y Y Y Y 04 05 2019
	City	State	Zip Code	Transaction ID : A2019-826027
	Bloomington	IN	47401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
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	Primary General Other (specify) ▼		807.73	
В.	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	ll) or Full C	Organization Name	Date of Receipt
	Mailing Address 3128 Mattatha Drive			04 19 2019
	City	State	Zip Code	Transaction ID : A2019-826590
	Bloomington	IN	47401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
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<u> </u>	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	ll) or Full C	Organization Name	Date of Receipt
	Mailing Address 9670 Rod Road			01 25 2019
	City	State	Zip Code	Transaction ID : A2019-45769
	Alpharetta	GA	30022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
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s	UBTOTAL of Receipts This Page (optional)			▶ 346.17

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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	y information copied from such Reports and s for commercial purposes, other than using th														
$\overline{)}$	NAME OF COMMITTEE (In Full)														
	Select Medical Corporation PA	С													
Α.	Full Name of Individual (Last, First, Middle In Williams, Brian, J, Mr.,	nitial) or Full C	Drganiz	zation Name		Date of Receipt									
	Mailing Address 9670 Rod Road					02 08 2019									
	City	State	Z	Zip Code		Trans	act	ion ID :	A2019-1	133	87				
	Alpharetta	GA		30022	_	Amoun	t of	Each F	Receipt th	nis F	Period				
	FEC ID number of contributing federal political committee.	С								_	115.3	39			
	Name of Employer (for Individual) Select Medical Corporation		•	n (for Individual) ce President		М	emc	tem							
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в.	Full Name of Individual (Last, First, Middle In Williams, Brian, J, Mr.,	nitial) or Full C	Organiz	zation Name		Date of	f Re	eceipt							
	Mailing Address 9670 Rod Road		02	/	22			019	Y						
	City	State	Z	Zip Code		Trans	acti	on ID :	A2019-3	277	56				
	Alpharetta	GA		30022		Period									
	FEC ID number of contributing federal political committee.						_	115.3	39						
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) ce President		М	emc	tem							
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	Other (specify)		,	461.56											
C.	Full Name of Individual (Last, First, Middle In Williams, Brian, J, Mr.,	nitial) or Full C	Organiz	zation Name		Date of	f Re	eceipt							
	Mailing Address 9670 Rod Road					03	/	D 08			019 [°]	Y			
	City	State	Z	Zip Code		Trans	sact	ion ID :	A2019-5	5219	38				
	Alpharetta	GA		30022	_	Amoun	t of	Each F	Receipt th	nis F	Period				
	FEC ID number of contributing federal political committee.	С						, .	, ,	_	115.3	39			
	Name of Employer (for Individual) Select Medical Corporation		•	n (for Individual) ce President		М	emo	ttem							
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 OF 108 (check only one)										
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	y information copied from such Reports and Sta for commercial purposes, other than using the													
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC													
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Α.	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	al) or Full C	organization Name	Date of Receipt										
	Mailing Address 9670 Rod Road	1 -		03 / D D / Y Y Y Y 2019										
	City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-540429										
			30022	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
	Select Medical Corporation	Ser	ior Vice President											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General		602.24	1										
	Other (specify)	L	692.34											
В.	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	al) or Full C	Organization Name	Date of Receipt										
	Mailing Address 9670 Rod Road													
				04 05 2019										
	City	State	Zip Code	Transaction ID : A2019-826011										
	Alpharetta	GA	30022	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		, 807.73]										
<u> </u>	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	al) or Full C	Prganization Name	Date of Receipt										
	Mailing Address 9670 Rod Road			04 19 2019										
	City	State	Zip Code	Transaction ID : A2019-826574										
	Alpharetta	GA	30022	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual)		upation (for Individual)	Memo Item										
	Select Medical Corporation Receipt For:		ior Vice President											
	Primary General	Aggregate	Year-to-Date ▼											
	Other (specify)		923.12	1										
	UBTOTAL of Receipts This Page (optional)			346.17										

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(for each category of the Detailed Summary Page					
				any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC							
Α.	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 7 Martha Court			03 / D D / Y Y Y Y 2019				
	City	State PA	Zip Code 15317	Transaction ID : A2019-605073				
	Canonsburg	FA	15317	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President of Operations	Memo Item				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify) ▼		230.8	2				
В.	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 7 Martha Court							
	City Canonsburg	State PA	Zip Code 15317	Transaction ID : A2019-605068 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President of Operations	Memo Item				
	Receipt For:	Aggregate	e Year-to-Date ▼ 269.2	9				
<u> </u>	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 7 Martha Court			04 / D D / Y Y Y Y 2019				
	City Canonsburg	State PA	Zip Code 15317	Transaction ID : A2019-745638				
	FEC ID number of contributing federal political committee.	C	13317	Amount of Each Receipt this Period 38.47				
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President of Operations	Memo Item				
	Receipt For:		e Year-to-Date ▼					
	Primary General Other (specify)		307.7	6				
s	UBTOTAL of Receipts This Page (optional)			115.41				

FEC Schedule A (Form 3X) Rev. 06/2016

	49 6# 202003233204300134			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 OF 108 (check only one) I1a 11b 11c 12 I3 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PA(e name and a		erson for the purpose of soliciting contributions
A .	Full Name of Individual (Last, First, Middle Inizanke, Christopher, V, Mr., Mailing Address 7 Martha Court City Canonsburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify) ▼	State PA C	Zip Code 15317 upation (for Individual) e President of Operations Year-to-Date ▼ 346.23	Date of Receipt 04 26 2019 Transaction ID : A2019-826049 Amount of Each Receipt this Period 38.47 Memo Item
В.	Full Name of Individual (Last, First, Middle Ini Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼	State C Occ	Zip Code	Date of Receipt
С.	Full Name of Individual (Last, First, Middle Ini Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State C Occu	Internation Name Zip Code Upation (for Individual) Year-to-Date ▼	Date of Receipt

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

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SCHEDULE B (FEC Form 3X)			F	OR L	INE 1	NUMBER: PAGE 96 OF 108											
TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page			only	lly one)											
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NAME OF COMMITTEE (In Full)																	
Select Medical Corporation PAC																	
Full Name (Last, First, Middle Initial)						_											
Cory Gardner for Senate							ate of	f Dis	sburse		ent	Y Y	YY				
Mailing Address 9227 E. Lincoln Ave. #200-234			01		0)7		20	019								
City Lone Tree	State CO	Zip Code 80124				FE	EC Id	enti	ficatio	n١	lumbe	r					
Purpose of Disbursement		00121	_	-		C	2	COC	04924	54							
Contribution			C)11					1. A.	-	: B71	4308	_				
Candidate Name				egory	/	Ar							this Pe	eriod			
Gardner, Cory, , ,			Ţ	ype		Г							2500.00				
	ement For: Primary	2020 General							7	_		4	-300.00				
President	Other (sp					Г	Me	mo	Item								
State: CO District:						-		-									
Full Name (Last, First, Middle Initial)	•							د م ا	- -								
B. McConnell Majority Leader Communication	nittee					_			sburse		=110						
Mailing Address 228 S. Washington St. Ste. 115									01 / D D / Y Y Y Y 01 07 2019								
City	State	Zip Code			-+			0.04	ficatio	n N	lumbo	r					
Alexandria	VA	22314				rt.		enti	ncatio	n P	lumbe		_				
Purpose of Disbursement Contribution		011							C C00548651								
Candidate Name		Category/ Type						Transaction ID : B714307									
								Amount of Each Disbursement this Period									
Office Sought: House Disburs	ement For:						5000.00										
Senate	Primary								1								
President	Other (sp	• ·				Г	Me	mo	Item								
State: District:		Not Applicab	le			_	1										
Full Name (Last, First, Middle Initial)						Da	ate of	f Dis	sburse	eme	ent						
							M M	/	D	D	/	Y Y	YY				
Mailing Address 16633 Ventura Blvd #1008						01 08 2019											
City	State	Zip Code				FF	EC Id	enti	ficatio	n١	lumbe	r					
Encino	CA	91436				172						-	-				
Purpose of Disbursement Contribution)11		C			04581	-							
Candidate Name				-		۸.					: B71		this Pe	ariad			
Chu, Judy, , ,				egory ype	"	A	noun		Lacii	וט	spuise	anent	1115 26	51100			
								5000.00									
Senate	Primary Other (sp										7						
President		Memo Item															
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ITEMIZED DISBURSEMENTS		Use sep for each	neck o														
		Detailed	Summary Page		28		28b		28c	29	┢	30b					
	y information copied from such Reports and State for commercial purposes, other than using the na																
\backslash	NAME OF COMMITTEE (In Full)																
	Select Medical Corporation PAC																
A.	Full Name (Last, First, Middle Initial)					Date of Disbursement											
	Mailing Address 425 Second Street NE		01 08 2019														
	City Washington	State DC	Zip Code 20002				FEC lo	dentif	icatio	n Numbe	r						
	Purpose of Disbursement Contribution			0,	11		С	1	02746								
	Candidate Name				egory/ /pe					ID : B71 Disburse	-	t this Period					
	Office Sought: House Disburse	ement For: Primary	2019 General	.,	<u> </u>		L		,			5000.00					
	State: District:	Other (spe	ecify) ▼ Not Applicabl	е			Me	emo	ltem								
_	Full Name (Last, First, Middle Initial)																
В.	Pascrell for Congress				Date of Disbursement												
	Mailing Address PO Box 100		01			8		019									
	City Teaneck			FEC lo	dentif	icatio	n Numbe	r									
	Purpose of Disbursement Contribution	11		C													
	Candidate Name		gory/		Amount of Each Disbursement this Period												
	Pascrell, William, J, , Jr. Office Sought: x House Disburse	ment For: 2020					5000.00										
	Senate	Primary															
	State: NJ District: 09	Other (spe	ecify)				Me	emo	ltem								
C.	Full Name (Last, First, Middle Initial) Pascrell for Congress						Date c	of Dis	burse	ment							
	Mailing Address PO Box 100					_	M M 01	/	D 0			019					
	City	State NJ	Zip Code 07666				FEC lo	dentif	icatio	n Numbe	r						
	Teaneck Purpose of Disbursement Contribution	INJ	07000	0,	11		C C00313510										
	Candidate Name		Cate	gory/					ID : B71 Disburse		t this Period						
	Pascrell, William, J, , Jr.Office Sought:xHouseDisburse	ement For:	2020	Iy	vpe	-						5000.00					
	Senate President			M	emo	,-	- 7										
_	State: NJ District: 09	-						onno	itoini								
s	UBTOTAL of Disbursements This Page (optional).				►						1	5000.00					
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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) Select Medical Corporation PAC Full Name (Last, First, Middle Initial) Date of Disbursement A. Brady for Congress Date of Disbursement Mailing Address PO Box 8277 011 City State Zip Code The Woodlands TX 77387 Purpose of Disbursement 011 Category/ Contribution 011 Category/ Office Sought: It House Disbursement For: 2020 Senate It Primary General Office Sought: It House Disbursement For: 2020 Senate It President Other (specify) ▼ Mailing Address 1751 Potomac Greens Drive Merio Item City Mailing Address 1751 Potomac Greens Drive FEC Identification Number City Mailing Address 1751 Potomac Greens Drive FEC Identification Number City Mexandria VA Zip Code Purpose of Disbursement VA	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	parate schedule(s) a category of the I Summary Page	(check only 21b	b 22 X 23 26 27						
Select Medical Corporation PAC Full Name (Last, First, Middle Initial) A Brady for Congress Mailing Address PO Box 8277 City City Contribution Contribution Category Propose of Disbursement Contribution Category Propose of Disbursement Contribution Category Propose of Disbursement Periods of Don Beyer Mailing Address 1751 Potomac Greens Drive City Category Propose of Disbursement Contribution Category Propose of Disbursement Contribution Category Propose of Disbursement Contribution Category Mailing Address 1751 Potomac Greens Drive City Address PO Box 2485 City State: YA Disbursement For: 2020 Propose of Disbursement Cotegory Total Cate, First, Middle Initia) Cotegory Purpose of Disbursem	or for commercial purposes, other than using the r	tements may name and add	not be sold or used dress of any politica	d by any perso I committee to	28b 28c 29 30b on for the purpose of soliciting contributions solicit contributions from such committee.						
A. Brady for Congress Date of Disbursement Mailing Address PO Box 8277 01 City Tx Z7387 Purpose of Disbursement 011 Candidate Name 011 Candidate Name 011 Diffice Sought: ¥ House Office Sought: ¥ House Disbursement Other (specify) Full Name (Last, First, Middle Initial) B. Friends of Don Beyer Mailing Address 1731 Potomac Greens Drive Citic 08 Contidate Name 011 Candidate Name 011 B. Friends of Don Beyer Date of Disbursement Mailing Address 1731 Potomac Greens Drive Citics 011 Candidate Name Disbursement For: 2020 Beyer, Don, , Jr. Disbursement For: 2020 Office Sought: ¥ House Primary General Purpose of Disbursement Disbursement For: 2020 Candidate Name Beyer, Don, , Jr. Office Sought: ¥ House President State: Yeade Disburs	Select Medical Corporation PAC										
City The Woodlands Tx Zip Code 77387 Purpose of Disbursement Contribution 01 Coolidate Number C Coolidate Number Brady, Kevin, P., Office Sought: X House Disbursement For: 2020 Smount of Each Disbursement this Perior State: Transaction ID: 87/4573 Amount of Each Disbursement this Perior State: Tx District: 06 President President Cher (specify) ▼ Full Name (Last, First, Middle Initial) B. Freinds of Don Beyer Mailing Address 1751 Potomac Greens Drive 01 01 01 City State Zip Code Coos55888 Transaction ID: 87/4573 Amount of Each Disbursement Contribution 011 Coos55888 Transaction ID: 87/4575 Contribution 011 Coos55888 Transaction ID: 87/4575 Contribution 011 Coos55888 Transaction ID: 87/4575 Contribution 01 Coos55888 Transaction ID: 87/4575 Contribution 01 Coos55888 Transaction ID: 87/4575 Contribution 01 Cood45279 Stoto 0	A. Brady for Congress										
Tx 7287 Purpose of Disbursement 011 Candidate Name 011 Brady, Kevin, P, , 011 Office Sought: ¥ Senate Disbursement For: 2020 Y Senate Prevident Office Sought: Senate Primary General Office Sought: Pull Name (Last, First, Middle Initial) B. Friendes of Don Beyer Mailing Address 1751 Potomac Greens Drive City State: Alexandria VA Purpose of Disbursement 011 Candidate Name 011 Beyer, Don, , , , Jr. 011 Office Sought: ¥ House Disbursement For: 2020 Senate Y Prevident Category/ Transaction D : B714575 Anount of Each Disbursement this Period Office Sought: ¥ House Disbursement For: 2020 State: VA Full Name (Last, First, Middle Initial) Charling Address PO Box 2485 City			01 10 2019								
Contribution 011 Candidate Name 011 Brady, Kevin, P, . Transaction ID: B7/4573 Office Sought: x State: TX Pull Name (Last, First, Midel Initial) B. Friends of Don Beyer Mailing Address 1751 Potomac Greens Drive City Alexandria Pulp Name (Last, First, Midel Initial) B. Friends of Don Beyer Mailing Address 1751 Potomac Greens Drive City Alexandria Puip Name (Last, First, Midel Initial) Contribution Controlution State: VA President Yein Seale President Yein Seale President Yein Seale President Yein Seale President Yein Seale <t< td=""><td></td><td></td><td></td><td></td><td>FEC Identification Number</td></t<>					FEC Identification Number						
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State: Tx District: 08 Full Name (Last, First, Middle Initial) B. Friends of Don Beyer Date of Disbursement Mailing Address 1751 Potomac Greens Drive 01 10 2019 City State Zip Code Zip Code FEC Identification Number Purpose of Disbursement 011 Candidate Name Candidate Name Candidate Name Beyer, Don, , , Jr. Office Sought: Y Phouse Disbursement For: 2020 5000.00 Office Sought: Y Phouse Disbursement For: 2020 5000.00 State: VA District: 08 011 Category/ State: VA District: 08 010 Memo Item Full Name (Last, First, Middle Initial) Category/ Date of Disbursement 01 10 2019 City State Zip Code VA 22152 Purpose of Disbursement Transaction ID : B714571 Amount of Each Disbursement For: 2019 Y Y Y Y Y City State Zip Code VA Z2152 Y Y <td>Office Sought: X House Disbur</td> <td>_ <u> </u></td> <td></td> <td>Туре</td> <td>5000.00</td>	Office Sought: X House Disbur	_ <u> </u>		Туре	5000.00						
B. Friends of Don Beyer Date of Disbursement Mailing Address 1751 Potomac Greens Drive Disbursement City State Zip Code Alexandria VA 2314 Purpose of Disbursement Ontribution Disbursement Candidate Name Disbursement For: 2020 FEC Identification Number State: VA Disbursement For: 2020 Seyer, Don, , , Jr. Other (specify) Memo Item State: VA Disbursement Other (specify) State: VA Zip Code Date of Disbursement Wailing Address PO Box 2485 Other (specify) Date of Disbursement Date of Disbursement City State Zip Code VA Zip Code Springfield VA Zip Code Code45379 Transaction ID: B714571 Mount of Each Disbursement Category/ Type Transaction Number Code45379 Transaction ID: B714571 Mount of Each Disbursement ID: Other (specify) Category/ Type Memo Item Souto 0 Office Sought: House Disbursement For: 2019 Memo Item Souto 0 Of		Other (spe	ecify) 🔻		Memo Item						
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Purpose of Disbursement Contribution 011 Candidate Name 011 Category/ Type C C C00555888 Transaction ID : B714575 Amount of Each Disbursement His Period Office Sought: X House Disbursement For: 2020 X President Other (specify) Memo Item State: VA District: 08 Full Name (Last, First, Middle Initial) C. Making America Prosperous PAC Mailing Address PO Box 2485 011 01 City State Zip Code Springfield VA 22152 Purpose of Disbursement 011 Candidate Name 011 Office Sought: House Senate Disbursement For: 2019 Fur Category/ Transaction ID : B714571 Amount of Each Disbursement this Period C 00445379 Transaction ID : B714571 Amount of Each Disbursement this Period Office Sought: House Disbursement For: 2019 Senate President Other (specify) ▼ State: Disbursements This Page (optional)	-				FEC Identification Number						
Candidate Name Category/ Type Amount of Each Disbursement this Period Office Sought: ¥ House Senate Disbursement For: 2020 Amount of Each Disbursement this Period State: VA District: 08 Full Name (Last, First, Middle Initial) Cher (specify) Date of Disbursement Mailing Address PO Box 2485 City State Zip Code 22152 City State Zip Code 22152 FEC Identification Number Purpose of Disbursement Contribution Office Sought: House Disbursement For: 2019 Office Sought: House Disbursement For: 2019 Fec Identification Number Office Sought: House Disbursement For: 2019 Memo Item State: District: Not Applicable Memo Item	Purpose of Disbursement		22314	011							
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C. Making America Prosperous PAC Date of Disbursement Mailing Address PO Box 2485 Image: Contribution for the second		Other (spe	ecify)		Memo Item						
Mailing Address PO Box 2485 01 10 2019 City State Zip Code 2152 FEC Identification Number Purpose of Disbursement 011 Cod445379 Transaction ID : B714571 Candidate Name 011 Category/ Type Cod445379 Transaction ID : B714571 Office Sought: House Disbursement For: 2019 Senate 5000.00 State: District: Not Applicable Memo Item SUBTOTAL of Disbursements This Page (optional)	_	2									
Springfield VA 22152 Purpose of Disbursement Contribution 011 Candidate Name 011 Candidate Name 011 Office Sought: House Disbursement For: 2019 President Primary State: District: Not Applicable	Mailing Address PO Box 2485										
Purpose of Disbursement Contribution 011 Candidate Name 011 Candidate Name 011 Candidate Name Category/ Type Office Sought: House Disbursement For: 2019 Senate Primary President Other (specify) ▼ State: District: Not Applicable Memo Item	-		· · ·		FEC Identification Number						
Office Sought: House Disbursement For: 2019 Senate Primary General President Other (specify) ▼ State: District: Not Applicable Memo Item	Purpose of Disbursement Contribution				Transaction ID : B714571						
Senate Primary General President Other (specify) ▼ State: District: Not Applicable	Office Sought: House Disbur	sement For:	2010								
State: District: Not Applicable SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary	General								
	State: District:		Not Applicable		<u> </u>						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b							
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NAME OF COMMITTEE (In Full)										
Select Medical Corporation PAC										
Full Name (Last, First, Middle Initial) A. Vern Buchanan for Congress			Date of Disbursement							
Mailing Address PO Box 48928			01 16 2019							
City Sarasota	State Zip Code FL 34230		FEC Identification Number							
Purpose of Disbursement Contribution	12 34230	011	C C00412759							
Candidate Name		Category/	Transaction ID : B714759 Amount of Each Disbursement this Period							
Buchanan, Vernon, , ,		Туре	5000.00							
Office Sought: House Disburse Senate President	ment For: 2020 Primary General Other (specify) ▼		Memo Item							
State: FL District: 16										
 Full Name (Last, First, Middle Initial) B. Vote to Elect Republicans Now PA Mailing Address, 20200 Indides Casel Drive 										
Ste 100	Ste 100									
City Dulles		FEC Identification Number								
Purpose of Disbursement Contribution Candidate Name		011	C C00431403 Transaction ID : B714760							
		Category/ Type	Amount of Each Disbursement this Period							
Senate	ment For: 2019 Primary General		5000.00							
State: District:	Other (specify) Not Applicable	e	Memo Item							
Full Name (Last, First, Middle Initial) C. Beatty for Congress			Date of Disbursement							
Mailing Address 222 East Town Street Suite 2W			01 / D D / Y Y Y Y 2019							
City Columbus Purpose of Disbursement Contribution	State Zip Code OH 43215	011	FEC Identification Number							
Candidate Name Beatty, Joyce, , ,	Transaction ID : B715252 Amount of Each Disbursement this Period									
	ment For: 2020 Primary General Other (specify) V	Туре	5000.00							
State: OH District: 03			Memo Item							
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SCHEDULE B (FEC Form 3X)	Use ser	parate schedule(s)	FOR LINE						
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NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Full Name (Last, First, Middle Initial) A. New Democrat Coalition PAC			Date of Disbursement						
Mailing Address 700 13th Street NW #600	1			01 18 2019					
City Washington	State DC	Zip Code 20005		FEC Identification Number					
Purpose of Disbursement Contribution			011	C C00409730 Transaction ID : B715253					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Senate	ement For: Primary Cother (spe	General		5000.00 Memo Item					
State: District:		Not Applicabl	e						
Full Name (Last, First, Middle Initial) B. The Markey Committee Mailing Address PO Box 120029				Date of Disbursement					
City Boston Purpose of Disbursement									
Contribution Candidate Name Markey, Edward, J, ,			011 Category/ Type	C C00196774 Transaction ID : B716049 Amount of Each Disbursement this Period					
	ement For: Primary Other (spe	General		2500.00 Memo Item					
Full Name (Last, First, Middle Initial) C. Cory Gardner for Senate				Date of Disbursement					
Mailing Address 9227 E. Lincoln Ave. #200-234				02 13 2019					
City Lone Tree Purpose of Disbursement	State CO	Zip Code 80124	011	FEC Identification Number					
Candidate Name Gardner, Cory, , ,									
Office Sought: House Disburs	Primary Other (spe	General		1000.00 Memo Item					
SUBTOTAL of Disbursements This Page (optional)			8500.00					
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	CHEDULE B (FEC Form 3X)	Use sen:	arate schedule(s)	-		LINE NUMBER: PAGE 101 OF 108											
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	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC																
A.	Full Name (Last, First, Middle Initial) Alaskans for Dan Sullivan									burse			Ý	YYY			
	Mailing Address 3705 Arctic Blvd #447		1				(2		1	9		2	019			
	City Anchorage	State AK	Zip Code 99503				FEC Identification Number										
	Purpose of Disbursement Contribution		01	1		С	-	-	57099 ction		: B717	704					
	Candidate Name Sullivan, Dan, , ,			Categ Typ			Amo	unt	of E	Each	Dis	sburse		this Period			
	Office Sought: House Disburse X Senate X President X	ement For: 2 Primary Other (spe	General					Mor		tom		-J	į	5000.00			
	State: AK District:							Merr	10 1	tem							
B.	Full Name (Last, First, Middle Initial) 3. Doug Jones for Senate Committee								Dist	burse	D	ent /		Y Y			
	Mailing Address PO Box 131025	State Zip Code AL 35213						02 19 2019 FEC Identification Number									
	City Birmingham																
	Purpose of Disbursement Contribution Candidate Name							C C00640623 Transaction ID : B717706									
	Jones, Doug, , ,	ement For: 2020					Amount of Each Disbursement this Period 5000.00										
	x Senate President State: AL	1	General					Merr	no l'	tem							
С.	Full Name (Last, First, Middle Initial)						Date	e of	Dist	burse		ent					
	Mailing Address 425 Second Street NE							2	/	D 1	р 9			019			
	City Washington	State DC	Zip Code 20002				FEC	lde	ntifi	catio	n N	lumbei					
	Purpose of Disbursement 011 Contribution Category/								C C00027466 Transaction ID : B717705 Amount of Each Disbursement this Period								
	Type Office Sought: House Disbursement For: 2019 Senate Primary								-9			-9-		5000.00			
	State: District:	Other (spe	cify) ▼ Not Applicable	9			Memo Item										
⊢	UBTOTAL of Disbursements This Page (optional).				-					y		-7-	1	5000.00			

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 102 OF 108						
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
Select Medical Corporation PAC										
Full Name (Last, First, Middle Initial) A. Seeking Justice Committee				Date of Disbursement						
Mailing Address PO Box 131025	1									
City Birmingham	State AL	Zip Code 35213		FEC Identification Number						
Purpose of Disbursement Contribution		33213	011	C C00666776						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disburs Senate	ement For: Primary	2019 General	Турс	5000.00						
State: District:	Other (spe	ecify) ▼ Not Applicable		Memo Item						
Full Name (Last, First, Middle Initial) B. Perimeter PAC										
Mailing Address 124 Washington Street Ste 101	02 26 Y Y Y Y Y 02 26 2019									
City Foxboro		FEC Identification Number								
Purpose of Disbursement Contribution	1		011	C C00544254 Transaction ID : B718109						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
Senate	ement For: Primary	General		5000.00 Memo Item						
State: District:	Other (spe	cify) Not Applicable	9							
Full Name (Last, First, Middle Initial) C. Tammy for Illinois				Date of Disbursement						
Mailing Address PO Box 10793				02 / D D / Y Y Y Y 26 2019						
City Chicago	State IL	Zip Code 60610		FEC Identification Number						
Purpose of Disbursement Contribution			011	C C00574889 Transaction ID : B718108						
Duckworth, Tammy, , ,	Candidate Name Duckworth, Tammy, , , Type									
Office Sought: House Disburst	ement For: Primary	x General		5000.00						
State: IL District:	Other (spe	ecny) ▼		Memo Item						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					E NUMBER: PAGE 103 OF 108											
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page		neck	c only o 21b 28a	one) 22 28b	×	23 28c		26	27 30b						
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NAME OF COMMITTEE (In Full) Select Medical Corporation PAC																	
Full Name (Last, First, Middle Initial) A. Together Everyone Realizes Real		Date of Disbursement															
Mailing Address 499 S Capitol STreet SW Ste 404																	
Washington	State DC	Zip Code 20003				FEC Identification Number											
Purpose of Disbursement Contribution			0	11		•	1. All 1.	52503 ction		71813	1						
Candidate Name Office Sought: House Disburse	ment For: 2	2010	Cate Ty	egor /pe	y/	Amoun	t of I	Each	Disbu	rseme	nt this Period						
Office Sought: House Disburse Senate President	Primary Other (spec	General cify) ▼				5000.00 Memo Item											
State: District:		Not Applicable	•														
B. Aftab for Ohio Mailing Address PO Box 713						Date of Disbursement											
Cincinnati Purpose of Disbursement	State Zip Code OH 45201					FEC Identification Number C C00667519											
Senate President	ment For: 2 Primary Other (spec	X General	011 Category/ Type			Transaction ID : B706454 Amount of Each Disbursement this Peri – 2500.00 Voided: Original check o 09/29/18											
State: OH District: 01 Full Name (Last, First, Middle Initial) C. Cory Booker for Senate						Date of Disbursement											
Mailing Address PO Box 15293						02	,	2			2019						
City Washington Purpose of Disbursement Contribution Candidate Name Booker, Cory, , ,	Washington DC 20003 Purpose of Disbursement Contribution Candidate Name						FEC Identification Number C C00540500 Transaction ID : B679866 Amount of Each Disbursement this Period										
	ment For: 2 Primary Other (spec	General		ype		- 2500.00 Voided: Original check date Memo Item 02/02/18											
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\setminus	NAME OF COMMITTEE (In Full)												
	Select Medical Corporation PAC												
Α.	Full Name (Last, First, Middle Initial)				Date of Disbursement								
	Mailing Address 430 S. Capitol St. SE				M M / D D / Y Y Y Y 02 28 2019								
	2nd Fl				dz 20								
	City Washington	State DC	Zip Code 20003		FEC Identification Number								
	Purpose of Disbursement Contribution			011	С соооооэз5								
	Candidate Name			Category/	Transaction ID : B683538 Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For:	2018	Туре	- 5000.00								
	Senate President	Primary Other (spe	General		Voided: Original check dated								
	State: District:	Other (spe	Not Applicable		Memo Item 03/27/18								
_	Full Name (Last, First, Middle Initial)												
В.	Keystone America PAC				Date of Disbursement								
	Mailing Address PO Box 58746				03 / D1 / Y1YYY 03 01 2019								
	City Philadephia	State PA	Zip Code 19102		FEC Identification Number								
	Purpose of Disbursement		19102		C C00439992								
	Contribution Candidate Name			011	Transaction ID : B722639								
				Category/ Type	Amount of Each Disbursement this Period								
	Office Sought: House Disburse Senate	ment For: Primary	2019 General		2500.00								
	President	Other (spe	cify)		Memo Item								
	State: District: Full Name (Last, First, Middle Initial)		Not Applicable										
C.	McConnell Victory Committee				Date of Disbursement								
	Mailing Address 228 S Washington St Ste 115				03 / D D / Y Y Y Y Y 05 / 2019								
	City Alexandria	State VA	Zip Code 22314		FEC Identification Number								
	Purpose of Disbursement Contribution			011	С С00638007								
	Candidate Name			Category/ Type	Transaction ID : B729344 Amount of Each Disbursement this Period								
		ment For:		1360	25000.00								
	President												
	State: District:		Not Applicable		Memo Item								
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or	for commercial purposes, other than using the na	me and addr	ress of any politica	al committee	e to	solicit	contr	ibuti	ions	fro	on suc	ch co	ommittee.	5		
\backslash	NAME OF COMMITTEE (In Full)															
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_	Full Name (Last, First, Middle Initial)	- ·				Dete	af [\:_b.								
А.	Citizens for Prosperity in America		Date of Disbursement													
	Mailing Address 228 S Washington St Ste 115				03 06 / Y Y Y Y 2019											
	City Alexandria	State VA	Zip Code 22314			FEC Identification Number										
	Purpose of Disbursement	•••	22314			С	C	0049	9165	54			-			
	Contribution			011		the second se	-	1.0		-	: B723	1329	-			
	Candidate Name			Category/ Type									t this Perio	bd		
	Office Sought: House Disburse	ment For: 2	2019	туре	_							ę	5000.00			
	Senate	Primary	General					7					- 46			
	President X	Other (spec	• • •				Nemo	o Ite	m							
	State: District:		Not Applicable			-										
B.	Full Name (Last, First, Middle Initial) Bonnie Watson Coleman for Congress								ırse	me	nt					
	Bonnie Walson Coleman for Congress								Date of Disbursement							
	Mailing Address 918 Pennsylvania Ave SE								03 15 2019							
	City	State DC		FEC Identification Number												
	Washington Purpose of Disbursement	20003								-						
	Contribution	011		C C00558437												
	Candidate Name		Category/						Transaction ID : B725085 Amount of Each Disbursement this Period							
	Coleman, Bonnie Watson, , ,			Type								Ju				
	° ^	1	2020			1000.00										
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	State: NJ District: 12		Siry)				Vlemo	o Ite	m							
	Full Name (Last, First, Middle Initial)															
C.	Josh Gottheimer for Congress					Date	of D)isbu	urse	me	nt					
	Mailing Address DO Day 504				_	M 0		/	D 15		/ Y		019			
	Mailing Address PO Box 584					0	2	1	R	5		20	019			
	City	State	Zip Code		\uparrow	FEC	Iden	tifica	ation	ר N	umber					
	Ridgewood Purpose of Disbursement	NJ	07451							-		-	- 1			
	Contribution			011		С	- 1-	0057								
	Candidate Name			Category/	1						: B72		t this Peric	bd		
	Gottheimer, Josh, , ,	Type		7 4110					bulbo			50				
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IT	EMIZED DISBURSEMENTS	for each	Use separate schedule(s) for each category of the Detailed Summary Page				/ one) 22 🗶 23 26 27						27					
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	ny information copied from such Reports and State for commercial purposes, other than using the na																	
\land	NAME OF COMMITTEE (In Full)																	
	Select Medical Corporation PAC																	
Α.	Full Name (Last, First, Middle Initial) Mikie Sherrill for Congress									Date of Disbursement								
	Mailing Address PO Box 43032			03 / D D / Y Y Y Y Y 2019														
	City Montclair	State NJ	Zip Code 07043				FEC Identification Number											
	Purpose of Disbursement Contribution			C)11		С С00640003											
	Candidate Name				egory	y/					: B725 burser		this Period					
	Sherrill, Rebecca, M, , Office Sought: x House Disburse	ement For: 2	2020	Ţ	ype							1	000.00					
	Senate x President	Primary Other (spe	General cify) ▼					4					40					
	State: NJ District: 11		- , , ,				M	emo	Item									
D	Full Name (Last, First, Middle Initial)						Dete											
р.	Van Drew for Congress						Date of Disbursement											
	Mailing Address PO Box 671						03 15 2019											
	City Cape May Court House	State NJ	Zip Code 08210				FEC I	denti	ficatio	n N	umber							
	Purpose of Disbursement	011					C C00661868											
	Contribution Candidate Name			Transaction ID : B725082														
	Van Drew, Jeff, , ,				egory ype	y/	Amount of Each Disbursement this Period											
		1	2020				1000.00											
	Senate x President	Primary Other (spe	Cify) General				Π.,											
	State: NJ District: 02]					M	emo	Item									
C.	Full Name (Last, First, Middle Initial) Terri Sewell for Congress						Date of	of Di	sburse	eme	nt							
	Mailing Address P.O. Box 1964						03	/	D 2	20	/ Y		919					
	City Birmingham	State AL	Zip Code 35201				FEC I	denti	ficatio	n N	umber							
	Purpose of Disbursement Contribution)11		С	1.00	04589	-								
	Candidate Name			la de la compañía de	egory	y/	Transaction ID : B774143 Amount of Each Disbursement this Period											
	Sewell, Terri, , , Office Sought: K House Disburse	ment For:	2020		ype	, 	2500.00											
	Senate Disburse	ursement For: 2020																
	State: AL District: 07	Other (specify) ▼					Memo Item											
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NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Full Name (Last, First, Middle Initial) A. Terri Sewell for Congress			Date of Disbursement								
Mailing Address P.O. Box 1964	0.1			03 20 2019							
City Birmingham	State AL	Zip Code 35201		FEC Identification Number							
Purpose of Disbursement Contribution	se of Disbursement										
Candidate Name			Category/	Transaction ID : B726311 Amount of Each Disbursement this Period							
Sewell, Terri, , , Office Sought: x House Disbur Senate	sement For: Primary	2020 X General	Туре	2500.00							
State: AL District: 07	Other (spe	••		Memo Item							
Full Name (Last, First, Middle Initial) B. Fred Keller for Congress		Date of Disbursement									
Mailing Address 23 N Derr Dr Ste 2			04 15 2019								
City Lewisburg	State PA	Zip Code 17837		FEC Identification Number							
Purpose of Disbursement Contribution			011	C C00697052 Transaction ID : B728502							
Candidate Name Keller, Fred, , ,			Category/ Type	Amount of Each Disbursement this Period							
Office Sought: 🖌 House Disbur Senate	sement For: Primary	2019 General		2500.00							
State: PA District: 12	X Other (spe	ecify) Special Genera	ıl	Memo Item							
Full Name (Last, First, Middle Initial) C. Shaheen For Senate				Date of Disbursement							
Mailing Address PO Box 75357				04 / D D / Y Y Y Y Y 18 2019							
City Washington	State DC	Zip Code 20013		FEC Identification Number							
Purpose of Disbursement Contribution			011	C C00457325 Transaction ID : B728703							
Candidate Name Shaheen, Jeanne, , ,			Category/ Type	Amount of Each Disbursement this Period							
× Senate	sement For: Primary	General		2500.00							
State: NH District:	Other (spe	ecity) 🔻		Memo Item							
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SCHEDULE B (FEC Form 3X)	11		FOR LINE	NE NUMBER: PAGE 108 OF 108								
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NAME OF COMMITTEE (In Full)												
Select Medical Corporation PAC												
Full Name (Last, First, Middle Initial) A. Silk PAC				Date of Disbursement								
Mailing Address PO Box 286				04 / D D / Y Y Y Y 04 18 2019								
City Caldwell	State NJ	Zip Code 07006		FEC Identification Number								
Purpose of Disbursement Contribution			011	C C00432765								
Candidate Name			Category/ Type	Transaction ID : B728704 Amount of Each Disbursement this Period								
Office Sought: House Disburse Senate	ement For: Primary	2019 General	5000.00									
State: District:	Other (spe	ecify) ▼ Not Applicable		Memo Item								
Full Name (Last, First, Middle Initial)	Data of Distance and											
^{B.} Together We Rise				Date of Disbursement								
Mailing Address 16633 Ventura Blvd #1008												
City Encino	State CA	Zip Code 91436		FEC Identification Number								
Purpose of Disbursement Contribution			011	C C00667360								
Candidate Name			Category/ Type	Transaction ID : B728705 Amount of Each Disbursement this Period								
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State: District:	Other (spe	ecify) Not Applicable	•	Memo Item								
Full Name (Last, First, Middle Initial) C. Team McHenry				Date of Disbursement								
Mailing Address 228 S Washington St Ste 115				04 / D D / Y Y Y Y Y 04 26 2019								
City Alexandria	State VA	Zip Code 22314		FEC Identification Number								
Purpose of Disbursement Contribution Candidate Name			011	C C00544650 Transaction ID : B729000								
			Category/ Type	Amount of Each Disbursement this Period								
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