

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		23421.35
(b) Cash on Hand at Beginning of Reporting Period.....	28581.02	
(c) Total Receipts (from Line 19)	6502.22	71446.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35083.24	94868.13
7. Total Disbursements (from Line 31).....	17500.00	77284.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17583.24	17583.24
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. 06/2004)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5804.65	47409.63
(ii) Unitemized	697.57	19037.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6502.22	66446.78
(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)	6502.22	66446.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6502.22	71446.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6502.22	71446.78

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	76000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	30.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	30.00
29. Other Disbursements	0.00	1254.89
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17500.00	77284.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17500.00	77284.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6502.22	66446.78
34. Total Contribution Refunds (from Line 28(d))	0.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6502.22	66416.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Steven Charles Adams
Full Name (Last, First, Middle Initial)

Mailing Address 37 Louanis Drive

City Reading State MA Zip Code 01867

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

Name of Employer HealthSouth Corporation Occupation Regional Marketing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22798

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

B. Steven Charles Adams
Full Name (Last, First, Middle Initial)

Mailing Address 37 Louanis Drive

City Reading State MA Zip Code 01867

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

Name of Employer HealthSouth Corporation Occupation Regional Marketing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22905

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

C. Steven Charles Adams
Full Name (Last, First, Middle Initial)

Mailing Address 37 Louanis Drive

City Reading State MA Zip Code 01867

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

Name of Employer HealthSouth Corporation Occupation Regional Marketing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23003

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 76
(check only one)

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

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
A. Steven L. Alwine

Mailing Address 635 Marlow Drive

City York	State PA	Zip Code 17402
--------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22799

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Steven L. Alwine

Mailing Address 635 Marlow Drive

City York	State PA	Zip Code 17402
--------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22906

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Steven L. Alwine

Mailing Address 635 Marlow Drive

City York	State PA	Zip Code 17402
--------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23004

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Tony Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Preserve Rookery Boulevard
 City Panama City Beach State FL Zip Code 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22803
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

B. Tony Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Preserve Rookery Boulevard
 City Panama City Beach State FL Zip Code 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22910
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Tony Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Preserve Rookery Boulevard
 City Panama City Beach State FL Zip Code 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23008
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. David Berry
Full Name (Last, First, Middle Initial)

Mailing Address 175 Central Street

City North Reading State MA Zip Code 01864

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

Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2015

Transaction ID : SA11AI.22804

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. David Berry
Full Name (Last, First, Middle Initial)

Mailing Address 175 Central Street

City North Reading State MA Zip Code 01864

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

Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11AI.22911

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. David Berry
Full Name (Last, First, Middle Initial)

Mailing Address 175 Central Street

City North Reading State MA Zip Code 01864

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

Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11AI.23009

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Gretchin P. Bitner
Full Name (Last, First, Middle Initial)

Mailing Address 20421 Anchor Circle

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Therapy Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22805

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Gretchin P. Bitner
Full Name (Last, First, Middle Initial)

Mailing Address 20421 Anchor Circle

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Therapy Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22912

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Gretchin P. Bitner
Full Name (Last, First, Middle Initial)

Mailing Address 20421 Anchor Circle

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Therapy Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23010

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Marcus John Braz
Full Name (Last, First, Middle Initial)
Mailing Address 8291 Deerbrook Circle
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22806
Amount of Each Receipt this Period 25.00
Payroll Deduction (\$25, 2 weeks)

B. Marcus John Braz
Full Name (Last, First, Middle Initial)
Mailing Address 8291 Deerbrook Circle
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 465.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22913
Amount of Each Receipt this Period 25.00
Payroll Deduction (\$25, 2 weeks)

C. Marcus John Braz
Full Name (Last, First, Middle Initial)
Mailing Address 8291 Deerbrook Circle
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23011
Amount of Each Receipt this Period 25.00
Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

City Frisco	State TX	Zip Code 75034
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22807

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

B. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

City Frisco	State TX	Zip Code 75034
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22914

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

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

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23012

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail

City Hockley	State TX	Zip Code 77447
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional President
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22808

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

B. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail

City Hockley	State TX	Zip Code 77447
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional President
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22915

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

C. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail

City Hockley	State TX	Zip Code 77447
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional President
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23013

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Terrence Brown
Full Name (Last, First, Middle Initial)
Mailing Address 5217 Meadow Garden Lane

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2015

Transaction ID : SA11AI.22809

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

B. Terrence Brown
Full Name (Last, First, Middle Initial)
Mailing Address 5217 Meadow Garden Lane

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2015

Transaction ID : SA11AI.22916

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

C. Terrence Brown
Full Name (Last, First, Middle Initial)
Mailing Address 5217 Meadow Garden Lane

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : SA11AI.23014

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	57.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6939

City Texarkana	State TX	Zip Code 75505
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Hospital Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
10 / 09 / 2015
Transaction ID : **SA11AI.22810**

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6939

City Texarkana	State TX	Zip Code 75505
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Hospital Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Date of Receipt
10 / 16 / 2015
Transaction ID : **SA11AI.22917**

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6939

City Texarkana	State TX	Zip Code 75505
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Hospital Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
10 / 23 / 2015
Transaction ID : **SA11AI.23015**

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Luanne B. Burton
Full Name (Last, First, Middle Initial)

Mailing Address 136 Providence Road

City Leesville State SC Zip Code 29070

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
10 / 16 / 2015
Transaction ID : SA11AI.22918

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Luanne B. Burton
Full Name (Last, First, Middle Initial)

Mailing Address 136 Providence Road

City Leesville State SC Zip Code 29070

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
10 / 23 / 2015
Transaction ID : SA11AI.23016

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Charles Richard Byrd III
Full Name (Last, First, Middle Initial)

Mailing Address 3609 Ridgcrest Road

City Birmingham State AL Zip Code 35223

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

Name of Employer HealthSouth Corporation Occupation National Real Estate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
10 / 09 / 2015
Transaction ID : SA11AI.22812

Amount of Each Receipt this Period
24.00

Payroll Deduction (\$24, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	44.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Real Estate Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **504.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22919
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

B. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Real Estate Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **528.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23017
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

c. Mary H. Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 775 Williamsburg Drive
 City Brick State NJ Zip Code 08724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Marketing Operations Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22920
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	58.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Mary H. Clarke
Full Name (Last, First, Middle Initial)

Mailing Address 775 Williamsburg Drive

City Brick State NJ Zip Code 08724

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

Name of Employer HealthSouth Corporation Occupation Marketing Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23018

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Georgeanne Cole
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8341

City Gray State TN Zip Code 37615

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22921

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Georgeanne Cole
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8341

City Gray State TN Zip Code 37615

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23019

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Kevin R. Conn
 Full Name (Last, First, Middle Initial)
 Mailing Address 6192 NW 88th Avenue
 City Parkland State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Operations Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22815
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

B. Kevin R. Conn
 Full Name (Last, First, Middle Initial)
 Mailing Address 6192 NW 88th Avenue
 City Parkland State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Operations Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22922
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Kevin R. Conn
 Full Name (Last, First, Middle Initial)
 Mailing Address 6192 NW 88th Avenue
 City Parkland State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Operations Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23020
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22819
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

B. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **315.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22926
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

C. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23024
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1660.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22822

Amount of Each Receipt this Period 83.00

Payroll Deduction (\$83, 2 weeks)

B. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1743.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22929

Amount of Each Receipt this Period 83.00

Payroll Deduction (\$83, 2 weeks)

C. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1826.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23027

Amount of Each Receipt this Period 83.00

Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	249.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Tammy E. Feuer
Full Name (Last, First, Middle Initial)
Mailing Address 73 North Woodland Avenue
City Woodbury State NJ Zip Code 08096
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22930
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 2 weeks)

B. Tammy E. Feuer
Full Name (Last, First, Middle Initial)
Mailing Address 73 North Woodland Avenue
City Woodbury State NJ Zip Code 08096
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23028
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 2 weeks)

C. Scott A. Filler
Full Name (Last, First, Middle Initial)
Mailing Address 400 Ruskin Drive
City Altoona State PA Zip Code 16602
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22931
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Scott A. Filler
Full Name (Last, First, Middle Initial)

Mailing Address 400 Ruskin Drive

City Altoona State PA Zip Code 16602

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11AI.23029

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Mark K. Freeburn
Full Name (Last, First, Middle Initial)

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2015

Transaction ID : SA11AI.22825

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Mark K. Freeburn
Full Name (Last, First, Middle Initial)

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11AI.22932

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Mark K. Freeburn
Full Name (Last, First, Middle Initial)

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23030

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Jerry Gray
Full Name (Last, First, Middle Initial)

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2870.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22827

Amount of Each Receipt this Period **56.00**

Payroll Deduction (\$56, 2 weeks)

C. Jerry Gray
Full Name (Last, First, Middle Initial)

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2926.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22934

Amount of Each Receipt this Period **56.00**

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **127.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Jerry Gray
Full Name (Last, First, Middle Initial)

Mailing Address 7130 East Saddleback Street
Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2982.00

Date of Receipt
10 / 23 / 2015
Transaction ID : SA11AI.23032

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

B. Nicholas David Hardin
Full Name (Last, First, Middle Initial)

Mailing Address 24014 Clover Trails

City Katy State TX Zip Code 77494

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
10 / 09 / 2015
Transaction ID : SA11AI.22830

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

C. Nicholas David Hardin
Full Name (Last, First, Middle Initial)

Mailing Address 24014 Clover Trails

City Katy State TX Zip Code 77494

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
399.00

Date of Receipt
10 / 16 / 2015
Transaction ID : SA11AI.22937

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 94.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Nicholas David Hardin
Full Name (Last, First, Middle Initial)
Mailing Address 24014 Clover Trails
City Katy State TX Zip Code 77494
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **418.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23034
Amount of Each Receipt this Period **19.00**
Payroll Deduction (\$19, 2 weeks)

B. Kevin Hardy
Full Name (Last, First, Middle Initial)
Mailing Address 1230 Buckhead Drive SW
City Vero Beach State FL Zip Code 32968
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22938
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

C. Kevin Hardy
Full Name (Last, First, Middle Initial)
Mailing Address 1230 Buckhead Drive SW
City Vero Beach State FL Zip Code 32968
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23035
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	39.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Gary Herbek
Full Name (Last, First, Middle Initial)

Mailing Address 11565 Hopyard Drive

City King George State VA Zip Code 22485

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
10 / 16 / 2015

Transaction ID : SA11AI.22940

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Gary Herbek
Full Name (Last, First, Middle Initial)

Mailing Address 11565 Hopyard Drive

City King George State VA Zip Code 22485

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
10 / 23 / 2015

Transaction ID : SA11AI.23037

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. William Bernard House III
Full Name (Last, First, Middle Initial)

Mailing Address 1739 Lake Cyrus Club Drive

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **975.00**

Date of Receipt
10 / 09 / 2015

Transaction ID : SA11AI.22835

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. William Bernard House III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1739 Lake Cyrus Club Drive
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22942
 Amount of Each Receipt this Period **25.00**
 Payroll Deduction (\$25, 2 weeks)

B. William Bernard House III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1739 Lake Cyrus Club Drive
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1025.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23039
 Amount of Each Receipt this Period **25.00**
 Payroll Deduction (\$25, 2 weeks)

C. Justin Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 5221 42nd Street NW
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Public Policy, Legislation & Regulator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22836
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Justin Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 5221 42nd Street NW

City Washington	State DC	Zip Code 20015
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Public Policy, Legislation & Regulatio
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22943

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

B. Justin Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 5221 42nd Street NW

City Washington	State DC	Zip Code 20015
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Public Policy, Legislation & Regulatio
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23040

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

C. W. Anthony Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 516 Upper Trail

City Blythewood	State SC	Zip Code 29016
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22837

Amount of Each Receipt this Period

25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. W. Anthony Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 516 Upper Trail

City Blythewood State SC Zip Code 29016

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22944

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

B. W. Anthony Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 516 Upper Trail

City Blythewood State SC Zip Code 29016

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23041

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

C. Barbara A. Jacobsmeyer
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Herman's Lake Court

City Florissant State MO Zip Code 63034

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22838

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Barbara A. Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Court
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22945
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

B. Barbara A. Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Court
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **880.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23042
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

C. Gregory M. Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 Gardener Road
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Marketing Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22946
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Gregory M. Johnston
Full Name (Last, First, Middle Initial)

Mailing Address 840 Gardener Road

City Rockledge State FL Zip Code 32955

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

Name of Employer HealthSouth Corporation Occupation Marketing Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23043

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 3001 East Chestnut Avenue Unit G 64

City Vineland State NJ Zip Code 08361

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

Name of Employer HealthSouth Corporation Occupation Marketing Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22947

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 3001 East Chestnut Avenue Unit G 64

City Vineland State NJ Zip Code 08361

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

Name of Employer HealthSouth Corporation Occupation Marketing Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23044

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Jill Jordan
Full Name (Last, First, Middle Initial)
Mailing Address 443 Lee Road 2099

City Phenix City	State AL	Zip Code 36870
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22948

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Jill Jordan
Full Name (Last, First, Middle Initial)
Mailing Address 443 Lee Road 2099

City Phenix City	State AL	Zip Code 36870
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23045

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Robert Bradford Kennedy
Full Name (Last, First, Middle Initial)
Mailing Address 359 Compton Road

City Cincinnati	State OH	Zip Code 45215
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22949

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Robert Bradford Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 359 Compton Road

City Cincinnati State OH Zip Code 45215

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23046

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22843

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

C. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22950

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **86.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23047

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

B. James D. Kirkland
Full Name (Last, First, Middle Initial)

Mailing Address 25 County Road 1060

City Clanton State AL Zip Code 35045

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

Name of Employer HealthSouth Corporation Occupation Print Services Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22951

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. James D. Kirkland
Full Name (Last, First, Middle Initial)

Mailing Address 25 County Road 1060

City Clanton State AL Zip Code 35045

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

Name of Employer HealthSouth Corporation Occupation Print Services Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23048

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	58.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. David Klementz
Full Name (Last, First, Middle Initial)

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1160.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : **SA11AI.22845**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

B. David Klementz
Full Name (Last, First, Middle Initial)

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1218.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : **SA11AI.22952**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

C. David Klementz
Full Name (Last, First, Middle Initial)

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1276.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : **SA11AI.23049**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **174.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Robert Kronenberg
Full Name (Last, First, Middle Initial)

Mailing Address 8743 West Tierra Buena Lane

City	State	Zip Code
Peoria	AZ	85382

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

Name of Employer	Occupation
HealthSouth Corporation	Pharmacy Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22953

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

B. Robert Kronenberg
Full Name (Last, First, Middle Initial)

Mailing Address 8743 West Tierra Buena Lane

City	State	Zip Code
Peoria	AZ	85382

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

Name of Employer	Occupation
HealthSouth Corporation	Pharmacy Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23050

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

C. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City	State	Zip Code
Pittsburgh	PA	15243

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22847

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	32.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **552.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22954

Amount of Each Receipt this Period
 12.00

Payroll Deduction (\$12, 2 weeks)

B. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **564.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23051

Amount of Each Receipt this Period
 12.00

Payroll Deduction (\$12, 2 weeks)

C. Stephen D. Leasure
Full Name (Last, First, Middle Initial)

Mailing Address 675 Shades Crest Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Senior Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22848

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **34.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Stephen D. Leasure
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Senior Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **340.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22955
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

B. Stephen D. Leasure
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Senior Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23052
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

C. Carol Lynne Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 2217 2nd Ave North
 City Birmingham State AL Zip Code 35203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Risk Management Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22956
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Carol Lynne Lee
Full Name (Last, First, Middle Initial)

Mailing Address 2217 2nd Ave North

City Birmingham State AL Zip Code 35203

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

Name of Employer HealthSouth Corporation Occupation National Risk Management Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23053

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

B. Robert Eugene Leech
Full Name (Last, First, Middle Initial)

Mailing Address 4032 Milner Way

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Home Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22850

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30, 2 weeks)

C. Robert Eugene Leech
Full Name (Last, First, Middle Initial)

Mailing Address 4032 Milner Way

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Home Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22957

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Robert Eugene Leech
Full Name (Last, First, Middle Initial)
Mailing Address 4032 Milner Way
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation National Home Health Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **660.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23054
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30, 2 weeks)

B. Phillip E. Loggins
Full Name (Last, First, Middle Initial)
Mailing Address 5022 McLaughlin Drive
City Tallahassee State FL Zip Code 32309
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Quality/Risk Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22851
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Phillip E. Loggins
Full Name (Last, First, Middle Initial)
Mailing Address 5022 McLaughlin Drive
City Tallahassee State FL Zip Code 32309
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Quality/Risk Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22958
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **60.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Phillip E. Loggins
Full Name (Last, First, Middle Initial)

Mailing Address 5022 McLaughlin Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer HealthSouth Corporation Occupation Regional Quality/Risk Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23055

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Robert Warren McCallum III
Full Name (Last, First, Middle Initial)

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corporation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22852

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

C. Robert Warren McCallum III
Full Name (Last, First, Middle Initial)

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corporation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22959

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	91.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
A. Robert Warren McCallum III
 Mailing Address 3405 Watertown Place
 City State Zip Code
 Vestavia Hills AL 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corproation Chief Tax Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 836.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23056
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Denise B. McGrath
 Mailing Address 222 River Walk Drive
 City State Zip Code
 Melbourne Beach FL 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hopsital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22853
 Amount of Each Receipt this Period
 15.00
 Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)
c. Denise B. McGrath
 Mailing Address 222 River Walk Drive
 City State Zip Code
 Melbourne Beach FL 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hopsital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22960
 Amount of Each Receipt this Period
 15.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Denise B. McGrath
Full Name (Last, First, Middle Initial)

Mailing Address 222 River Walk Drive

City Melbourne Beach State FL Zip Code 32951

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23057

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Matthew A. McGuire
Full Name (Last, First, Middle Initial)

Mailing Address 8470 Carrington Lakes Cove

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Information Technology Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22961

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Matthew A. McGuire
Full Name (Last, First, Middle Initial)

Mailing Address 8470 Carrington Lakes Cove

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Information Technology Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23058

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Monnie Moore
Full Name (Last, First, Middle Initial)
Mailing Address 904 Southpoint Circle

City Morgantown	State WV	Zip Code 26501
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Pharmacy Director
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22962

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Monnie Moore
Full Name (Last, First, Middle Initial)
Mailing Address 904 Southpoint Circle

City Morgantown	State WV	Zip Code 26501
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Pharmacy Director
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23059

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive

City Dothan	State AL	Zip Code 36303
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Quality/Risk Director
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22856

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive
City Dothan State AL Zip Code 36303
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Quality/Risk Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22963
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

B. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive
City Dothan State AL Zip Code 36303
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Quality/Risk Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23060
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

C. Ed M. Mowen
Full Name (Last, First, Middle Initial)
Mailing Address 8613 Highlands Drive
City Trussville State AL Zip Code 35173
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22857
Amount of Each Receipt this Period **100.00**
Payroll Deduction (\$100, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **140.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Ed M. Mowen
Full Name (Last, First, Middle Initial)

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22964

Amount of Each Receipt this Period
 100.00

Payroll Deduction (\$100, 2 weeks)

B. Ed M. Mowen
Full Name (Last, First, Middle Initial)

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23061

Amount of Each Receipt this Period
 100.00

Payroll Deduction (\$100, 2 weeks)

C. Lori Munyan
Full Name (Last, First, Middle Initial)

Mailing Address 1799 Slocum Avenue

City Wall State NJ Zip Code 07719

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22965

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Lori Munyan
Full Name (Last, First, Middle Initial)
Mailing Address 1799 Slocum Avenue
City Wall State NJ Zip Code 07719
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Human Resources Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23062
Amount of Each Receipt this Period **100.00**
Payroll Deduction (\$10, 2 weeks)

B. Sandra W. Murvin
Full Name (Last, First, Middle Initial)
Mailing Address 2858 Canterbury Road
City Birmingham State AL Zip Code 35223
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Deputy General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **800.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22859
Amount of Each Receipt this Period **40.00**
Payroll Deduction (\$40, 2 weeks)

C. Sandra W. Murvin
Full Name (Last, First, Middle Initial)
Mailing Address 2858 Canterbury Road
City Birmingham State AL Zip Code 35223
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Deputy General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **840.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22966
Amount of Each Receipt this Period **40.00**
Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **90.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Sandra W. Murvin
Full Name (Last, First, Middle Initial)

Mailing Address 2858 Canterbury Road

City	State	Zip Code
Birmingham	AL	35223

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

Name of Employer	Occupation
HealthSouth Corporation	Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23063

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

B. Patrici Ostaszewski
Full Name (Last, First, Middle Initial)

Mailing Address 54 Bay Way

City	State	Zip Code
Brick	NJ	08723

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22860

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30, 2 weeks)

C. Patrici Ostaszewski
Full Name (Last, First, Middle Initial)

Mailing Address 54 Bay Way

City	State	Zip Code
Brick	NJ	08723

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22967

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Patrici Ostaszewski
Full Name (Last, First, Middle Initial)
Mailing Address 54 Bay Way
City Brick State NJ Zip Code 08723
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23064
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30, 2 weeks)

B. Dawn S. Pearson
Full Name (Last, First, Middle Initial)
Mailing Address 22 Linda Lane
City Egg Harbor Township State NJ Zip Code 08234
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Human Resources Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22861
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

C. Dawn S. Pearson
Full Name (Last, First, Middle Initial)
Mailing Address 22 Linda Lane
City Egg Harbor Township State NJ Zip Code 08234
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Human Resources Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22968
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
A. Dawn S. Pearson

Mailing Address 22 Linda Lane

City Egg Harbor Township State NJ Zip Code 08234

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11AI.23065

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Troy G. Powell

Mailing Address 103 History Lane

City Summerville State SC Zip Code 29485

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

Name of Employer Healthsouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11AI.22970

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Troy G. Powell

Mailing Address 103 History Lane

City Summerville State SC Zip Code 29485

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

Name of Employer Healthsouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11AI.23067

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. William W. Poynter
Full Name (Last, First, Middle Initial)

Mailing Address 1202 Berwick Road

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Talent Acquisition Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22864

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

B. William W. Poynter
Full Name (Last, First, Middle Initial)

Mailing Address 1202 Berwick Road

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Talent Acquisition Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22971

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

C. William W. Poynter
Full Name (Last, First, Middle Initial)

Mailing Address 1202 Berwick Road

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Talent Acquisition Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23068

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Andrew L. Price
Full Name (Last, First, Middle Initial)
Mailing Address 72 Nolen Street

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Accounting Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
10 / 09 / 2015
Transaction ID : SA11AI.22865

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

B. Andrew L. Price
Full Name (Last, First, Middle Initial)
Mailing Address 72 Nolen Street

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Accounting Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1680.00

Date of Receipt
10 / 16 / 2015
Transaction ID : SA11AI.22972

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

C. Andrew L. Price
Full Name (Last, First, Middle Initial)
Mailing Address 72 Nolen Street

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Accounting Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1760.00

Date of Receipt
10 / 23 / 2015
Transaction ID : SA11AI.23069

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Robert J. Rosene
 Full Name (Last, First, Middle Initial)
 Mailing Address 9747 West Vandeventor Drive
 City Littleton State CO Zip Code 80128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22866
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

B. Robert J. Rosene
 Full Name (Last, First, Middle Initial)
 Mailing Address 9747 West Vandeventor Drive
 City Littleton State CO Zip Code 80128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22973
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

C. Robert J. Rosene
 Full Name (Last, First, Middle Initial)
 Mailing Address 9747 West Vandeventor Drive
 City Littleton State CO Zip Code 80128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23070
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Steve M. Santel
Full Name (Last, First, Middle Initial)

Mailing Address 12005 Wesford Drive

City Maryland Heights State MO Zip Code 63043

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

Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22975

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Steve M. Santel
Full Name (Last, First, Middle Initial)

Mailing Address 12005 Wesford Drive

City Maryland Heights State MO Zip Code 63043

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

Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23072

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)

Mailing Address 1827 Sentry Oak Court

City Orange Park State FL Zip Code 32003

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

Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22869

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)

Mailing Address 1827 Sentry Oak Court

City Orange Park State FL Zip Code 32003

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

Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22976

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

B. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)

Mailing Address 1827 Sentry Oak Court

City Orange Park State FL Zip Code 32003

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

Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **465.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23073

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

C. Michele M. Skripps
Full Name (Last, First, Middle Initial)

Mailing Address 122 Pine Ridge Drive

City Belton State SC Zip Code 29627

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22871

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **70.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Lisa Smith
Full Name (Last, First, Middle Initial)

Mailing Address 130 Ashford Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Internal Audit Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23076

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

B. Walter C. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1040 Broadway Street

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation State Regulatory Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22873

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

C. Walter C. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1040 Broadway Street

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation State Regulatory Affairs Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22980

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Walter C. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1040 Broadway Street
 City Birmingham State AL Zip Code 35209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation State Regulatory Affairs Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23077
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

B. Karen Christmas Spencer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2520 Oakleaf Circle
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Tax Operations & Accounting Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22982
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

C. Karen Christmas Spencer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2520 Oakleaf Circle
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Tax Operations & Accounting Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23079
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 35.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Darla J. Summerville		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2015 Transaction ID : SA11AI.22984
Mailing Address 219 Piper Street		Amount of Each Receipt this Period 10.00
City Lilly	State PA	Zip Code 15938
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth	Occupation Certified Case Management Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
		Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial) B. Darla J. Summerville		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2015 Transaction ID : SA11AI.23081
Mailing Address 219 Piper Street		Amount of Each Receipt this Period 10.00
City Lilly	State PA	Zip Code 15938
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth	Occupation Certified Case Management Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
		Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial) C. Dean Taggart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2015 Transaction ID : SA11AI.22878
Mailing Address 704 Guardbridge Court		Amount of Each Receipt this Period 15.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Inspector General
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Dean Taggart
Full Name (Last, First, Middle Initial)
Mailing Address 704 Guardbridge Court
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Inspector General
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22985
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Dean Taggart
Full Name (Last, First, Middle Initial)
Mailing Address 704 Guardbridge Court
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Inspector General
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23082
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Mark J. Tarr
Full Name (Last, First, Middle Initial)
Mailing Address 4158 Appomattox Lane
City Mountain Brook State AL Zip Code 35213
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Chief Operating Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22879
Amount of Each Receipt this Period **115.00**
Payroll Deduction (\$115, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **145.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mark J. Tarr

Mailing Address 4158 Appomattox Lane

City State Zip Code
Mountain Brook AL 35213

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

Name of Employer Occupation
HealthSouth Corporation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : SA11AI.22986

Amount of Each Receipt this Period
115.00

Payroll Deduction (\$115, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Mark J. Tarr

Mailing Address 4158 Appomattox Lane

City State Zip Code
Mountain Brook AL 35213

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

Name of Employer Occupation
HealthSouth Corporation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23083

Amount of Each Receipt this Period
115.00

Payroll Deduction (\$115, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Sheila Terry

Mailing Address 177 Wisteria Dr.

City State Zip Code
Chelsea AL 35043

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

Name of Employer Occupation
HealthSouth Corporation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : SA11AI.22880

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22987
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **330.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23084
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Curtis H. Traylor
Full Name (Last, First, Middle Initial)
Mailing Address 3307 Waters Edge
City Manvel State TX Zip Code 77578
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Pharmacy Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **336.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22883
Amount of Each Receipt this Period **12.00**
Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **42.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Curtis H. Traylor
Full Name (Last, First, Middle Initial)

Mailing Address 3307 Waters Edge

City Manvel	State TX	Zip Code 77578
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Pharmacy Director
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **348.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22990

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

B. Curtis H. Traylor
Full Name (Last, First, Middle Initial)

Mailing Address 3307 Waters Edge

City Manvel	State TX	Zip Code 77578
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Pharmacy Director
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23087

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

C. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 1884 West Holly Trail

City Hawkins	State TX	Zip Code 75570
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Controller
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22884

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	39.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 1884 West Holly Trail

City Hawkins State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22991

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 1884 West Holly Trail

City Hawkins State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23088

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

C. Tricia A. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 1803 Southpointe Drive

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation National Human Resources Operations Di

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22994

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Tricia A. Wells
Full Name (Last, First, Middle Initial)
Mailing Address 1803 Southpointe Drive
City Hoover State AL Zip Code 35244
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation National Human Resources Operations Di
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23091
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

B. John Whittington
Full Name (Last, First, Middle Initial)
Mailing Address 2716 Watkins Glen Drive
City Birmingham State AL Zip Code 35216
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation General Counsel & Corporate Secretary
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **3552.60**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22888
Amount of Each Receipt this Period **177.63**
Payroll Deduction (\$177.63, 2 weeks)

C. John Whittington
Full Name (Last, First, Middle Initial)
Mailing Address 2716 Watkins Glen Drive
City Birmingham State AL Zip Code 35216
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation General Counsel & Corporate Secretary
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **3730.23**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.22995
Amount of Each Receipt this Period **177.63**
Payroll Deduction (\$177.63, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **365.26**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. John Whittington
Full Name (Last, First, Middle Initial)

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Corporation Occupation General Counsel & Corporate Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3907.86

Date of Receipt 10 / 23 / 2015
Transaction ID : SA11AI.23092

Amount of Each Receipt this Period 177.63

Payroll Deduction (\$177.63, 2 weeks)

B. Linda Masone Wilder
Full Name (Last, First, Middle Initial)

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 09 / 2015
Transaction ID : SA11AI.22889

Amount of Each Receipt this Period 70.00

Payroll Deduction (\$70, 2 weeks)

C. Linda Masone Wilder
Full Name (Last, First, Middle Initial)

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1470.00

Date of Receipt 10 / 16 / 2015
Transaction ID : SA11AI.22996

Amount of Each Receipt this Period 70.00

Payroll Deduction (\$70, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	317.63
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Linda Masone Wilder
Full Name (Last, First, Middle Initial)
Mailing Address 2335 Ridge Trail

City Birmingham	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional President
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : SA11AI.23093

Amount of Each Receipt this Period
70.00

Payroll Deduction (\$70, 2 weeks)

B. Donn G. Willey
Full Name (Last, First, Middle Initial)
Mailing Address 1932 River Woods Road

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation National Compensation Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : SA11AI.22890

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Donn G. Willey
Full Name (Last, First, Middle Initial)
Mailing Address 1932 River Woods Road

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation National Compensation Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2015

Transaction ID : SA11AI.22897

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Donn G. Willey
Full Name (Last, First, Middle Initial)

Mailing Address 1932 River Woods Road

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation National Compensation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : **SA11AI.23094**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Arthur E Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **10 / 09 / 2015**
Transaction ID : **SA11AI.22891**

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

C. Arthur E Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1615.32**

Date of Receipt **10 / 16 / 2015**
Transaction ID : **SA11AI.22998**

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **168.84**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Arthur E Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1692.24**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23095

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

B. John Ryan Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Monaghan Drive

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Managed Care Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22892

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

C. John Ryan Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Monaghan Drive

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Managed Care Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.22999

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	100.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. John Ryan Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Monaghan Drive

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Managed Care Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23096

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

B. Robert M Wisner
Full Name (Last, First, Middle Initial)

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Reimbursement Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **591.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22893

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

C. Robert M Wisner
Full Name (Last, First, Middle Initial)

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Reimbursement Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **629.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.23000

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **88.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Robert M Wisner
Full Name (Last, First, Middle Initial)

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Reimbursement Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **667.00**

Date of Receipt **10 / 23 / 2015**

Transaction ID : SA11AI.23097

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

B. William Forrest Wittig
Full Name (Last, First, Middle Initial)

Mailing Address 3969 Haddon Circle

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 09 / 2015**

Transaction ID : SA11AI.22894

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

C. William Forrest Wittig
Full Name (Last, First, Middle Initial)

Mailing Address 3969 Haddon Circle

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : SA11AI.23001

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **68.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. William Forrest Wittig
 Full Name (Last, First, Middle Initial)
 Mailing Address 3969 Haddon Circle
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **10 / 23 / 2015**
Transaction ID : SA11AI.23098
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

B. Russell Yeager
 Full Name (Last, First, Middle Initial)
 Mailing Address 1348 Saddlecreek Parkway
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **10 / 09 / 2015**
Transaction ID : SA11AI.22895
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction (\$38, 2 weeks)

C. Russell Yeager
 Full Name (Last, First, Middle Initial)
 Mailing Address 1348 Saddlecreek Parkway
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **798.00**

Date of Receipt **10 / 16 / 2015**
Transaction ID : SA11AI.23002
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **91.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Russell Yeager
 Full Name (Last, First, Middle Initial)
 Mailing Address 1348 Saddlecreek Parkway
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 836.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : SA11AI.23099
 Amount of Each Receipt this Period 38.00
 Payroll Deduction (\$38, 2 weeks)

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	38.00
TOTAL This Period (last page this line number only).....	5804.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 245

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22898

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF GLENN THOMPSON

Mailing Address PO Box 1112

City State College State PA Zip Code 16804

Purpose of Disbursement

Candidate Name

GLENN MR. THOMPSON

Office Sought: House Senate President
State: PA District: 05

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22904

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROY BLUNT

Mailing Address PO Box 50100
PO Box 50100

City Springfield State MO Zip Code 65805

Purpose of Disbursement

Candidate Name

ROY BLUNT

Office Sought: House Senate President
State: MO District: 07

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22901

Amount of Each Disbursement this Period

2500.00

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

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

9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. HOSPITAL AND HEALTHSYSTEM ASSOC. OF PA - FEDERAL POLITICAL ACTION COMM (HAPAC)

Mailing Address POST OFFICE BOX 8600

City HARRISBURG State PA Zip Code 17105

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22900

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City SUGAR LAND State TX Zip Code 77496

Purpose of Disbursement

Candidate Name

PETER G OLSON

Office Sought: House Senate President
State: TX District: 22

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22903

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement

Candidate Name

VERNON BUCHANAN

Office Sought: House Senate President
State: FL District: 16

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Transaction ID : SB23.22902

Amount of Each Disbursement this Period

2500.00

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

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

8000.00

17500.00