



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2013"/>		30361.64
(b) Cash on Hand at Beginning of Reporting Period.....	20558.26	
(c) Total Receipts (from Line 19) .....	5207.48	54664.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25765.74	85025.74
7. Total Disbursements (from Line 31).....	12000.00	71260.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13765.74	13765.74
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	4289.10	33110.78
(ii) Unitemized .....	918.38	18053.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	5207.48	51164.10
(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) .....	5207.48	51164.10
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	3500.00
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))..... ▶	5207.48	54664.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5207.48	54664.10

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	71000.00
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	260.00
(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	260.00
29. Other Disbursements .....	0.00	0.00
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)) ..	12000.00	71260.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.00	71260.00

**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) .....	5207.48	51164.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	260.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5207.48	50904.10
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 46
<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. 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 Director of Marketing
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11AI.16357**

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 Director of Marketing
---	--

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
07	/	26	/	2013

**Transaction ID : SA11AI.16472**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20, 2 weeks)

**C. Kenneth J Anthony**  
Full Name (Last, First, Middle Initial)  
Mailing Address 734 10th Street

City Oakmont	State PA	Zip Code 15139
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11AI.16360**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> 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 46  
(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. Kenneth J Anthony**  
 Mailing Address 734 10th Street  
 City State Zip Code  
 Oakmont PA 15139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Corporation Healthcare Facility 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  
 07 / 26 / 2013  
**Transaction ID : SA11AI.16475**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)  
**B. Tony Bennett**  
 Mailing Address 3108 Preserve Rookery Blvd  
 City State Zip Code  
 Panama City Beach FL 32408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Corporation Healthcare Facility 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  
 07 / 12 / 2013  
**Transaction ID : SA11AI.16362**  
 Amount of Each Receipt this Period  
 15.00  
 Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)  
**C. Tony Bennett**  
 Mailing Address 3108 Preserve Rookery Blvd  
 City State Zip Code  
 Panama City Beach FL 32408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Corporation Healthcare Facility Administrator  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : SA11AI.16477**  
 Amount of Each Receipt this Period  
 15.00  
 Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 46
<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. 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 Director of Managed Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **07 / 12 / 2013**  
Transaction ID : **SA11AI.16363**

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 Director of Managed Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 26 / 2013**  
Transaction ID : **SA11AI.16478**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **07 / 12 / 2013**  
Transaction ID : **SA11AI.16365**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 46
	<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 CEO

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  
**07 / 26 / 2013**

**Transaction ID : SA11Al.16480**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 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 ▼ **560.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 12 / 2013**

**Transaction ID : SA11Al.16367**

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 ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 26 / 2013**

**Transaction ID : SA11Al.16482**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction (\$40, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> 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 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**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 Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11Al.16368**  
 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 Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 07 / 26 / 2013  
**Transaction ID : SA11Al.16483**  
 Amount of Each Receipt this Period 19.00  
 Payroll Deduction (\$19, 2 weeks)

**C. Phylis A. Buck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 770068  
 City Memphis State TN Zip Code 38177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Hospital Controller  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11Al.16369**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	53.00
<b>TOTAL</b> 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 46
	<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. Phylis A. Buck**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16484**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

**B. Michael L. Bullitt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3711 Kessler

City Wichita Falls	State TX	Zip Code 76309
-----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16370**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20, 2 weeks)

**C. Michael L. Bullitt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3711 Kessler

City Wichita Falls	State TX	Zip Code 76309
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility 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
07	/	26	/	2013

**Transaction ID : SA11Al.16485**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 46
	<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 VP Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16371**  
 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 VP Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16488**  
 Amount of Each Receipt this Period **24.00**  
 Payroll Deduction (\$24, 2 weeks)

**C. Dr. Dexanne B. Clohan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2351 River Grand Drive  
 City Birmingham State AL Zip Code 35243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Chief Medical Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2688.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16374**  
 Amount of Each Receipt this Period **192.00**  
 Payroll Deduction (\$192, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>240.00</b>
<b>TOTAL</b> 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 46
	<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. Dr. Dexanne B. Clohan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2351 River Grand Drive  
 City Birmingham State AL Zip Code 35243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Chief Medical Officer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2880.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16491**  
 Amount of Each Receipt this Period **192.00**  
 Payroll Deduction (\$192, 2 weeks)

**B. Kevin R. Conn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10456 N.W. 48th Manor  
 City Coral Springs State FL Zip Code 33076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Vice President - Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **280.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16376**  
 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 10456 N.W. 48th Manor  
 City Coral Springs State FL Zip Code 33076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Vice President - Operations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16493**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **232.00**  
**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 46
	<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	State	Zip Code
Bow	NH	03304

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

Name of Employer	Occupation
HealthSouth Corporation	Healthcare Facility 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
07	/	12	/	2013

**Transaction ID : SA11AI.16383**

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	State	Zip Code
Bow	NH	03304

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

Name of Employer	Occupation
HealthSouth Corporation	Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11AI.16499**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**C. Edmund M. Fay**  
Full Name (Last, First, Middle Initial)  
Mailing Address 527 Valley Road

City	State	Zip Code
Birmingham	AL	35206

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

Name of Employer	Occupation
HealthSouth Corporation	SVP Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1162.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11AI.16387**

Amount of Each Receipt this Period  

83.00
-------

Payroll Deduction (\$83, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>113.00</b>
<b>TOTAL</b> 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 46
	<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 SVP Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1245.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16503**

Amount of Each Receipt this Period **83.00**

Payroll Deduction (\$83, 2 weeks)

**B. Barbara V. Feth**  
Full Name (Last, First, Middle Initial)

Mailing Address 1930 East Claire Drive

City Phoenix State AZ Zip Code 85022

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **07 / 12 / 2013**

**Transaction ID : SA11Al.16388**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

**C. Barbara V. Feth**  
Full Name (Last, First, Middle Initial)

Mailing Address 1930 East Claire Drive

City Phoenix State AZ Zip Code 85022

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16504**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **123.00**

**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 46
	<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 CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11AI.16390**  
Amount of Each Receipt this Period **15.00**  
Payroll Deduction (\$15, 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 CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11AI.16506**  
Amount of Each Receipt this Period **15.00**  
Payroll Deduction (\$15, 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 SVP Inpatient Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **784.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11AI.16392**  
Amount of Each Receipt this Period **56.00**  
Payroll Deduction (\$56, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>86.00</b>
<b>TOTAL</b> 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 46
	<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. 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 SVP Inpatient Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11AI.16508**

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 Administration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt **07 / 12 / 2013**

**Transaction ID : SA11AI.16393**

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 Administration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11AI.16509**

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 19 OF 46
	<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 House**  
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	Occupation Regional Controller
---------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16514**

Amount of Each Receipt this Period  

50.00
-------

Payroll Deduction (\$50, 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	Occupation VP Government and Regulatory Affairs
---------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16399**

Amount of Each Receipt this Period  

40.00
-------

Payroll Deduction (\$40, 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	Occupation VP Government and Regulatory Affairs
---------------------------------	--

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
07	/	26	/	2013

**Transaction ID : SA11Al.16515**

Amount of Each Receipt this Period  

40.00
-------

Payroll Deduction (\$40, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 46
	<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 939 Laurel Meadow Lane  
 City Fort Mill State SC Zip Code 29708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11AI.16400**  
 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 939 Laurel Meadow Lane  
 City Fort Mill State SC Zip Code 29708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **375.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11AI.16516**  
 Amount of Each Receipt this Period **25.00**  
 Payroll Deduction (\$25, 2 weeks)

**C. Barbara Jacobsmeyer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3908 Herman's Lake Ct  
 City Florissant State MO Zip Code 63034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11AI.16401**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>100.00</b>
<b>TOTAL</b> 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 21 OF 46
	(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. Barbara Jacobsmeyer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3908 Herman's Lake Ct  
 City Florissant State MO Zip Code 63034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16517**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50, 2 weeks)

**B. Jerry Jasper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5911 Richmond Road #4207  
 City Texarkana State TX Zip Code 75503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Hospital CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16402**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20, 2 weeks)

**C. Jerry Jasper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5911 Richmond Road #4207  
 City Texarkana State TX Zip Code 75503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Hospital CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16518**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> 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 46
	<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. Sylvia Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 51 Paa-Ko Drive

City Sandia Park	State NM	Zip Code 87047
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility 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
07	/	12	/	2013

**Transaction ID : SA11Al.16406**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**B. Sylvia Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 51 Paa-Ko Drive

City Sandia Park	State NM	Zip Code 87047
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16522**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 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	Occupation CFO - Inpatient Division
---------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **812.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16408**

Amount of Each Receipt this Period  

58.00
-------

Payroll Deduction (\$58, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>88.00</b>
<b>TOTAL</b> 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 46
	<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 Klementz**  
Full Name (Last, First, Middle Initial)

Mailing Address 808 Parkview Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth	CFO - Inpatient Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **870.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16524**

Amount of Each Receipt this Period  

58.00
-------

Payroll Deduction (\$58, 2 weeks)

**B. Thomas Langley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1203 Elm Drive

City	State	Zip Code
Alabaster	AL	35007

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

Name of Employer	Occupation
Healthsouth	Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16411**

Amount of Each Receipt this Period  

50.00
-------

Payroll Deduction (\$50, 2 weeks)

**C. Thomas Langley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1203 Elm Drive

City	State	Zip Code
Alabaster	AL	35007

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

Name of Employer	Occupation
Healthsouth	Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16527**

Amount of Each Receipt this Period  

50.00
-------

Payroll Deduction (\$50, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>158.00</b>
<b>TOTAL</b> 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 46
<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. 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 Director of General Corp & Securities  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **280.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16412**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 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 Director of General Corp & Securities  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16528**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 2 weeks)

**C. Carol Lynne Lee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1811 Martin St So  
City Pell City State AL Zip Code 35128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HealthSouth Occupation Director of Risk Management  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16413**  
Amount of Each Receipt this Period **25.00**  
Payroll Deduction (\$25, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>65.00</b>
<b>TOTAL</b> 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 46
	<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 1811 Martin St So  
 City State Zip Code  
 Pell City AL 35128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Director of Risk Management  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : SA11Al.16529**  
 Amount of Each Receipt this Period  
 25.00  
 Payroll Deduction (\$25, 2 weeks)

**B. Robert Leech**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8945 Evening Grove Cr  
 City State Zip Code  
 Cordova TN 38018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSoth VP, Home Health Operations  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013  
**Transaction ID : SA11Al.16414**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

**C. Robert Leech**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8945 Evening Grove Cr  
 City State Zip Code  
 Cordova TN 38018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSoth VP, Home Health Operations  
 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  
 07 / 26 / 2013  
**Transaction ID : SA11Al.16530**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**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 Director of Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 07 / 12 / 2013  
**Transaction ID : SA11Al.16415**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15, 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 Director of Risk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 07 / 26 / 2013  
**Transaction ID : SA11Al.16531**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15, 2 weeks)

**C. Peter M. Mantegazza**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38 Madeline Drive  
 City Ridgefield State CT Zip Code 06877  
 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 ▼ 532.00

Date of Receipt  
 07 / 12 / 2013  
**Transaction ID : SA11Al.16417**  
 Amount of Each Receipt this Period 38.00  
 Payroll Deduction (\$38, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	68.00
<b>TOTAL</b> 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 46
	<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. Peter M. Mantegazza**

Mailing Address 38 Madeline Drive

City State Zip Code  
Ridgefield CT 06877

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

Name of Employer Occupation  
HealthSouth Corporation Regional President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2013  
**Transaction ID : SA11Al.16533**

Amount of Each Receipt this Period  
38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)  
**B. Robert W. 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 ▼  
532.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2013  
**Transaction ID : SA11Al.16419**

Amount of Each Receipt this Period  
38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)  
**C. Robert W. 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 ▼  
570.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2013  
**Transaction ID : SA11Al.16535**

Amount of Each Receipt this Period  
38.00

Payroll Deduction (\$38, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 46
	<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 Healthcare Facility 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
07	/	12	/	2013

**Transaction ID : SA11Al.16421**

Amount of Each Receipt this Period  

50.00	50.00	50.00	50.00	50.00
-------	-------	-------	-------	-------

**15.00**

Payroll Deduction (\$15, 2 weeks)

**B. 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 Healthcare Facility Administrator
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16537**

Amount of Each Receipt this Period  

50.00	50.00	50.00	50.00	50.00
-------	-------	-------	-------	-------

**15.00**

Payroll Deduction (\$15, 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	Occupation Director of Quality
---------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16424**

Amount of Each Receipt this Period  

50.00	50.00	50.00	50.00	50.00
-------	-------	-------	-------	-------

**20.00**

Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>50.00</b>
<b>TOTAL</b> 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 46
	<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 Occupation Director of Quality  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16540**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 2 weeks)

**B. Ed 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 Occupation Regional Controller  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1120.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : SA11Al.16425**  
Amount of Each Receipt this Period **80.00**  
Payroll Deduction (\$80, 2 weeks)

**C. Ed 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 Occupation Regional Controller  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1200.00**

Date of Receipt **07 / 26 / 2013**  
**Transaction ID : SA11Al.16541**  
Amount of Each Receipt this Period **80.00**  
Payroll Deduction (\$80, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>180.00</b>
<b>TOTAL</b> 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 46
	<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 Murvin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1831 28th Ave South  
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11Al.16427**

Amount of Each Receipt this Period  
40.00

Payroll Deduction (\$40, 2 weeks)

**B. Sandra Murvin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1831 28th Ave South  
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
07 / 26 / 2013  
**Transaction ID : SA11Al.16543**

Amount of Each Receipt this Period  
40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 54 Bay Way Drive

City Brick State NJ Zip Code 08723

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

Name of Employer HealthSouth Occupation VP Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11Al.16429**

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 31 OF 46
	<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. Patricia Ostaszewski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 Bay Way Drive  
 City State Zip Code  
 Brick NJ 08723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth VP Operations  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : SA11Al.16545**  
 Amount of Each Receipt this Period  
 25.00  
 Payroll Deduction (\$25, 2 weeks)

**B. Shawn Patzkowsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 133 Narrows Peak Circle  
 City State Zip Code  
 Birmingham AL 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Director of Income Tax Compliance  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013  
**Transaction ID : SA11Al.16430**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

**C. Shawn Patzkowsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 133 Narrows Peak Circle  
 City State Zip Code  
 Birmingham AL 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HealthSouth Director of Income Tax Compliance  
 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  
 07 / 26 / 2013  
**Transaction ID : SA11Al.16546**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 46
	<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 State Zip Code  
Egg Harbor Township NJ 08234

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

Name of Employer Occupation  
HealthSouth Corporation Human Resources Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11AI.16431**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 22 Linda Lane

City State Zip Code  
Egg Harbor Township NJ 08234

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

Name of Employer Occupation  
HealthSouth Corporation Human Resources Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
07 / 26 / 2013  
**Transaction ID : SA11AI.16547**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)  
**C. Gretchin G. Pecher**

Mailing Address 9502 Pettswood Dr

City State Zip Code  
Huntington Beach CA 92646

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

Name of Employer Occupation  
HealthSouth Corporation Director of Therapy Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11AI.16432**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 46
	(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"/> 15
<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. Gretchin G. Pecher**  
Full Name (Last, First, Middle Initial)

Mailing Address 9502 Pettswood Dr

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11AI.16548**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

**B. Donna M. Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 2518 Belmont Terrace #2A

City Fredericksburg State VA Zip Code 22401

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

Name of Employer HealhtSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **07 / 12 / 2013**

**Transaction ID : SA11AI.16435**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

**C. Donna M. Phillips**  
Full Name (Last, First, Middle Initial)

Mailing Address 2518 Belmont Terrace #2A

City Fredericksburg State VA Zip Code 22401

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

Name of Employer HealhtSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11AI.16551**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>35.00</b>
<b>TOTAL</b> 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 46
	<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 1379 East Island Place

City	State	Zip Code
Memphis	TN	38103

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Corporate Recruiting

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
07	/	12	/	2013

**Transaction ID : SA11AI.16437**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 1379 East Island Place

City	State	Zip Code
Memphis	TN	38103

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Corporate Recruiting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11AI.16553**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**C. Andrew L. Price**  
Full Name (Last, First, Middle Initial)

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11AI.16438**

Amount of Each Receipt this Period  

100.00
--------

Payroll Deduction (\$100, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 46
	<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**

Full Name (Last, First, Middle Initial)  
**A. Andrew L. Price**

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16554**

Amount of Each Receipt this Period  
100.00

Payroll Deduction (\$100, 2 weeks)

Full Name (Last, First, Middle Initial)  
**B. Robert J. Rosene**

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

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
07	/	12	/	2013

**Transaction ID : SA11Al.16439**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)  
**C. Robert J. Rosene**

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16555**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> 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 46
<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. James A. Simpson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4285 Lexie Circle

City Trussville	State AL	Zip Code 35173
--------------------	-------------	-------------------

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

Name of Employer Healthsouth	Occupation Vice 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
07	/	12	/	2013

**Transaction ID : SA11Al.16445**

Amount of Each Receipt this Period  

60.00
-------

Payroll Deduction (\$60, 2 weeks)

**B. James A. Simpson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4285 Lexie Circle

City Trussville	State AL	Zip Code 35173
--------------------	-------------	-------------------

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

Name of Employer Healthsouth	Occupation Vice President
---------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16561**

Amount of Each Receipt this Period  

60.00
-------

Payroll Deduction (\$60, 2 weeks)

**C. Walter Smith**  
Full Name (Last, First, Middle Initial)  
Mailing Address 728 Ridge Way Circle

City Birmingham	State AL	Zip Code 35226
--------------------	-------------	-------------------

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

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

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
07	/	12	/	2013

**Transaction ID : SA11Al.16448**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>135.00</b>
<b>TOTAL</b> 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 37 OF 46 (check only one)
<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	<input type="checkbox"/> 17

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

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

Mailing Address 728 Ridge Way Circle

City Birmingham	State AL	Zip Code 35226
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16564**

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 VP Internal Audit
---	---------------------------------

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
07	/	12	/	2013

**Transaction ID : SA11Al.16451**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**C. 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 VP Internal Audit
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16567**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>45.00</b>
<b>TOTAL</b> 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 38 OF 46
	(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. Mark J Tarr**  
Full Name (Last, First, Middle Initial)

Mailing Address 1039 Williams Trace

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

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

Name of Employer HealthSouth	Occupation President - Inpatient Division
---------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1610.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2013

**Transaction ID : SA11Al.16452**

Amount of Each Receipt this Period  
115.00

Payroll Deduction (\$115, 2 weeks)

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

Mailing Address 1039 Williams Trace

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

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

Name of Employer HealthSouth	Occupation President - Inpatient Division
---------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1725.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2013

**Transaction ID : SA11Al.16568**

Amount of Each Receipt this Period  
115.00

Payroll Deduction (\$115, 2 weeks)

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

Mailing Address 109 West Hoskins Street

City New Boston	State TX	Zip Code 75570
--------------------	-------------	-------------------

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

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

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
07		12		2013

**Transaction ID : SA11Al.16456**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> 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 46
	<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. Michael G. Treadway**

Mailing Address 109 West Hoskins Street

City State Zip Code  
New Boston TX 75570

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

Name of Employer Occupation  
HealthSouth Corporation Healthcare Facility Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2013  
**Transaction ID : SA11Al.16572**

Amount of Each Receipt this Period  
15.00

Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)  
**B. Enrique Alberto Vicens-Rivera**

Mailing Address PO Box 1992

City State Zip Code  
Guaynabo PR 00970

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

Name of Employer Occupation  
HealthSouth Corporation Hospital Administration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2013  
**Transaction ID : SA11Al.16457**

Amount of Each Receipt this Period  
19.00

Payroll Deduction (\$19, 2 weeks)

Full Name (Last, First, Middle Initial)  
**C. Enrique Alberto Vicens-Rivera**

Mailing Address PO Box 1992

City State Zip Code  
Guaynabo PR 00970

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

Name of Employer Occupation  
HealthSouth Corporation Hospital Administration

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2013  
**Transaction ID : SA11Al.16573**

Amount of Each Receipt this Period  
19.00

Payroll Deduction (\$19, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	53.00
<b>TOTAL</b> 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 46
	<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 Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 27th Street South  
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11Al.16458**

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$30, 2 weeks)

**B. Andrew Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 27th Street South  
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
07 / 26 / 2013  
**Transaction ID : SA11Al.16574**

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$30, 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 Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2486.82

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : SA11Al.16461**

Amount of Each Receipt this Period  
177.63

Payroll Deduction (\$177.63, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 237.63

**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 41 OF 46
	<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	<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 Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2664.45**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16577**

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 Occupation Senior VP Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **980.00**

Date of Receipt **07 / 12 / 2013**

**Transaction ID : SA11Al.16462**

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 Occupation Senior VP Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16578**

Amount of Each Receipt this Period **70.00**

Payroll Deduction (\$70, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>317.63</b>
<b>TOTAL</b> 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 46
	<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 123 Riverchase Trails

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation National Director of Compensation
---	---

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
07	/	12	/	2013

**Transaction ID : SA11Al.16463**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**B. Donn G. Willey**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 Riverchase Trails

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation National Director of Compensation
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

**Transaction ID : SA11Al.16579**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 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	Occupation Senior VP Real Estate
---------------------------------	-------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1076.88**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : SA11Al.16464**

Amount of Each Receipt this Period  

76.92
-------

Payroll Deduction (\$76.92, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>106.92</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 46
	<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 Occupation Senior VP Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16580**

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 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 Occupation SVP Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **07 / 12 / 2013**

**Transaction ID : SA11Al.16466**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 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 Occupation SVP Reimbursement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **07 / 26 / 2013**

**Transaction ID : SA11Al.16582**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **126.92**

**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 44 OF 46
	<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**

Full Name (Last, First, Middle Initial) <b>A. Russell Yeager</b>		Date of Receipt MM / DD / YYYY 07 / 12 / 2013 <b>Transaction ID : SA11Al.16468</b>
Mailing Address 628 Springbank Terrace		Amount of Each Receipt this Period 19.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks)	
Name of Employer HealthSouth	Occupation VP Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

Full Name (Last, First, Middle Initial) <b>B. Russell Yeager</b>		Date of Receipt MM / DD / YYYY 07 / 26 / 2013 <b>Transaction ID : SA11Al.16584</b>
Mailing Address 628 Springbank Terrace		Amount of Each Receipt this Period 19.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks)	
Name of Employer HealthSouth	Occupation VP Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks)	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4289.10

**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. BRADY FOR CONGRESS**

Mailing Address P.O. BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement

Candidate Name

**KEVIN BRADY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	3		

**Transaction ID : SB23.16470**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF SAM JOHNSON**

Mailing Address P.O. Box 860096

City Plano State TX Zip Code 75086

Purpose of Disbursement

Candidate Name

**SAMUEL R HON. JOHNSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	3		

**Transaction ID : SB23.16471**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF SESSIONS SENATE COMMITTEE INC**

Mailing Address P O BOX 4278

City MONTGOMERY State AL Zip Code 36103

Purpose of Disbursement

Candidate Name

**JEFFERSON B SESSIONS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AL District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	3		

**Transaction ID : SB23.16469**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

**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. JON RUNYAN FOR CONGRESS, INC**

Mailing Address PO Box 225

City State Zip Code  
Colonia NJ 07067

Purpose of Disbursement

Candidate Name  
**JON RUNYAN**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : **SB23.16356**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MIKE KELLY FOR CONGRESS**

Mailing Address PO BOX 476

City State Zip Code  
LYNDORA PA 16045

Purpose of Disbursement

Candidate Name  
**GEORGE J JR KELLY**

Office Sought:  House  
 Senate  
 President  
State: PA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : **SB23.16354**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. POMPEO FOR CONGRESS INC**

Mailing Address PO BOX 780146

City State Zip Code  
WICHITA KS 67212

Purpose of Disbursement

Candidate Name  
**MICHAEL RICHARD POMPEO**

Office Sought:  House  
 Senate  
 President  
State: KS District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : **SB23.16355**

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

12000.00