

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HealthSouth Corporation Political Action Committee

ADDRESS (number and street) 3660 Grandview Parkway, Suite 200 Birmingham AL 35243

2. FEC IDENTIFICATION NUMBER C C00414649 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09 / 01 / 2013 through 09 / 30 / 2013

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

Type or Print Name of Treasurer Edmund M. Fay

Signature of Treasurer Edmund M. Fay [Electronically Filed] Date 10 / 18 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**HealthSouth Corporation Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="30361.64"/>	<input type="text" value="30361.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26302.22"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5651.48"/>	<input type="text" value="72852.06"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="31953.70"/>	<input type="text" value="103213.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10928.84"/>	<input type="text" value="82188.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21024.86"/>	<input type="text" value="21024.86"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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).....	4762.10	49205.98
(ii) Unitemized .....	889.38	20146.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5651.48	69352.06
(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) .....	5651.48	69352.06
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))..... ▶	5651.48	72852.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5651.48	72852.06

**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.....	10000.00	81000.00
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 .....	928.84	928.84
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)) ..	10928.84	82188.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10928.84	82188.84

**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) .....	5651.48	69352.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	260.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5651.48	69092.06
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 51
<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 **360.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11AI.16844**  
 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 **380.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11AI.16957**  
 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 **360.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11AI.16846**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
<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. Kenneth J Anthony**  
 Full Name (Last, First, Middle Initial)  
 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 ▼  
 380.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : SA11AI.16959**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

**B. Tony Bennett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3108 Preserve Rookery 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 ▼  
 285.00

Date of Receipt  
 09 / 26 / 2013  
**Transaction ID : SA11AI.16848**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

**C. Tony Bennett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3108 Preserve Rookery 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 ▼  
 305.00

Date of Receipt  
 09 / 27 / 2013  
**Transaction ID : SA11AI.16961**  
 Amount of Each Receipt this Period  
 20.00  
 Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
<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. 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 ▼ **360.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11AI.16849**

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 ▼ **380.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11AI.16962**

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 ▼ **360.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11AI.16929**

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 51
<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. 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 ▼ **380.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.16964**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, weeks)

**B. Jennifer Brewer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6613 Fox View Drive  
City Edwardsville State IL Zip Code 62025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HealthSouth Corporation Occupation Hospital Administrator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11Al.16930**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 2 weeks)

**C. Jennifer Brewer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6613 Fox View Drive  
City Edwardsville State IL Zip Code 62025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HealthSouth Corporation Occupation Hospital Administrator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.16965**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
<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. 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 ▼ **720.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16850**

Amount of Each Receipt this Period  

40.00
-------

Payroll Deduction (\$40, 2 weeks)

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

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16966**

Amount of Each Receipt this Period  

40.00
-------

Payroll Deduction (\$40, 2 weeks)

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

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

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

Name of Employer Healthsouth	Occupation Healthcare Facility Administrator
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16851**

Amount of Each Receipt this Period  

19.00
-------

Payroll Deduction (\$19, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>99.00</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 11 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

Name of Employer Healthsouth	Occupation Healthcare Facility Administrator
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16967**

Amount of Each Receipt this Period  

49.00
-------

Payroll Deduction (\$19, 2 weeks)

**B. 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 ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16931**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**C. Phylis A. Buck**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 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 ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16968**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>49.00</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 12 OF 51
<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. 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 ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16932**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20, 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 ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16969**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20, 2 weeks)

**C. Charles Richard Byrd III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3609 Ridgcrest Road

City Birmingham	State AL	Zip Code 35223
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation VP Real Estate
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16854**

Amount of Each Receipt this Period  

24.00
-------

Payroll Deduction (\$24, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>64.00</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 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ 456.00

Date of Receipt 09 / 27 / 2013  
**Transaction ID : SA11Al.16972**  
 Amount of Each Receipt this Period 24.00  
 Payroll Deduction (\$24, 2 weeks)

**B. Daniel J. Cahill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Pattison Avenue  
 City Dudley State MA Zip Code 01571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Director of Pharmacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2013  
**Transaction ID : SA11Al.17072**  
 Amount of Each Receipt this Period 250.00

**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 ▼ 3456.00

Date of Receipt 09 / 26 / 2013  
**Transaction ID : SA11Al.16856**  
 Amount of Each Receipt this Period 192.00  
 Payroll Deduction (\$192, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	466.00
<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 14 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼  
3648.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16975**

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 ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16857**

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 ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16977**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	232.00
<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 15 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Catherine V. Devaney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 Buckingham Drive  
 City Bow State NH Zip Code 03304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 26 / 2013  
**Transaction ID : SA11AI.16861**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15, 2 weeks)

**B. Catherine V. Devaney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 Buckingham Drive  
 City Bow State NH Zip Code 03304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 27 / 2013  
**Transaction ID : SA11AI.16981**  
 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 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 ▼ 1494.00

Date of Receipt 09 / 26 / 2013  
**Transaction ID : SA11AI.16865**  
 Amount of Each Receipt this Period 83.00  
 Payroll Deduction (\$83, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	113.00
<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 16 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. 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 ▼ **1577.00**

Date of Receipt **09 / 27 / 2013**  
Transaction ID : **SA11AI.16985**

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 ▼ **360.00**

Date of Receipt **09 / 26 / 2013**  
Transaction ID : **SA11AI.16866**

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 ▼ **380.00**

Date of Receipt **09 / 27 / 2013**  
Transaction ID : **SA11AI.16986**

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 17 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **270.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11AI.16868**

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 ▼ **285.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11AI.16988**

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 ▼ **3008.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11AI.16870**

Amount of Each Receipt this Period **56.00**

Payroll Deduction (\$56, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 51
	<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. 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 ▼  
3064.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.16991**

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 ▼  
285.00

Date of Receipt  
09 / 26 / 2013  
**Transaction ID : SA11AI.16871**

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 ▼  
304.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.16992**

Amount of Each Receipt this Period  
19.00

Payroll Deduction (\$19, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	94.00
<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 19 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Susan Heath**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2192

City Brentwood State TN Zip Code 37024

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 ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11Al.16873**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 2 weeks)

**B. Susan Heath**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2192

City Brentwood State TN Zip Code 37024

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 ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11Al.16995**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 2 weeks)

**C. 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 ▼ **825.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11Al.16874**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. William 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 ▼ **875.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16997**

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 ▼ **720.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16875**

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 ▼ **760.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.16998**

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 21 OF 51
<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. 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 ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11AI.16876**

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 ▼ **475.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11AI.16999**

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 ▼ **870.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11AI.16877**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction (\$40, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **910.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11AI.17000**  
 Amount of Each Receipt this Period **40.00**  
 Payroll Deduction (\$40, 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 ▼ **360.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11AI.16938**  
 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 ▼ **380.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11AI.17001**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</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 51
<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. 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 ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16941**

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 ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.17005**

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 ▼ **1044.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16881**

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 24 OF 51
	<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

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

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

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation CFO - Inpatient Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1102.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11AI.17008**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11AI.16882**

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11AI.17010**

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **82.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 51
	<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. Thomas Langley**

Mailing Address 1203 Elm Drive

City Alabaster State AL Zip Code 35007

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  
**09 / 26 / 2013**

**Transaction ID : SA11Al.16883**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50, 2 weeks)

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

Mailing Address 1203 Elm Drive

City Alabaster State AL Zip Code 35007

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 ▼ **950.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Al.17011**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50, 2 weeks)

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

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 ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Al.16884**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **120.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 51
<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. 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 **380.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.17012**  
Amount of Each Receipt this Period **20.00**  
Payroll Deduction (\$20, 2 weeks)

**B. 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 **435.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11Al.16885**  
Amount of Each Receipt this Period **10.00**  
Payroll Deduction (\$10, 2 weeks)

**C. Carol Lynne Lee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 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 **445.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.17013**  
Amount of Each Receipt this Period **10.00**  
Payroll Deduction (\$10, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>40.00</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 27 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 8945 Evening Grove Cr

City Cordova State TN Zip Code 38018

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

Name of Employer HealthSoth Occupation VP, Home Health Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Al.16886**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30, 2 weeks)

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

Mailing Address 8945 Evening Grove Cr

City Cordova State TN Zip Code 38018

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

Name of Employer HealthSoth Occupation VP, Home Health Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Al.17014**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30, 2 weeks)

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

Mailing Address 5022 McLaughlin Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer HealthSouth Corporation Occupation Director of Risk

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Al.16943**

Amount of Each Receipt this Period  
**15.00**

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>75.00</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 28 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **285.00**

Date of Receipt  
**09 / 27 / 2013**

**Transaction ID : SA11AI.17016**

Amount of Each Receipt this Period  
**15.00**

Payroll Deduction (\$15, 2 weeks)

**B. 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 ▼ **684.00**

Date of Receipt  
**09 / 26 / 2013**

**Transaction ID : SA11AI.16888**

Amount of Each Receipt this Period  
**38.00**

Payroll Deduction (\$38, 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 ▼ **722.00**

Date of Receipt  
**09 / 27 / 2013**

**Transaction ID : SA11AI.17018**

Amount of Each Receipt this Period  
**38.00**

Payroll Deduction (\$38, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **91.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 51
<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. Robert W. McCallum III**  
Full Name (Last, First, Middle Initial)

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11Al.16889**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **722.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.17020**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

**C. 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 ▼ **270.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11Al.16946**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **91.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **285.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17022**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

**B. Wanda Morales**  
Full Name (Last, First, Middle Initial)

Mailing Address 309 Chapelwood Drive

City Dothan State AL Zip Code 36303

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

Name of Employer HealthSouth Occupation Director of Quality

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11Al.16892**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 ▼ **380.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17025**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 31 OF 51  
(check only one)

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

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

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

**A. Ed 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 ▼ 1500.00

Date of Receipt 09 / 26 / 2013  
**Transaction ID : SA11Al.16893**  
Amount of Each Receipt this Period 100.00  
Payroll Deduction (\$100, 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 ▼ 1600.00

Date of Receipt 09 / 27 / 2013  
**Transaction ID : SA11Al.17026**  
Amount of Each Receipt this Period 100.00  
Payroll Deduction (\$100, 2 weeks)

**C. 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 ▼ 720.00

Date of Receipt 09 / 26 / 2013  
**Transaction ID : SA11Al.16895**  
Amount of Each Receipt this Period 40.00  
Payroll Deduction (\$40, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼  
760.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.17028**

Amount of Each Receipt this Period  
40.00

Payroll Deduction (\$40, 2 weeks)

**B. 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 ▼  
450.00

Date of Receipt  
09 / 26 / 2013  
**Transaction ID : SA11AI.16897**

Amount of Each Receipt this Period  
25.00

Payroll Deduction (\$25, 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 ▼  
480.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.17030**

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$30, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 51
<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. Shawn Patzkowsky**  
Full Name (Last, First, Middle Initial)  
Mailing Address 133 Narrows Peak Circle

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

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

Name of Employer HealthSouth	Occupation Director of Income Tax Compliance
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16898**

Amount of Each Receipt this Period  

120.00
--------

Payroll Deduction (\$20, 2 weeks)

**B. Shawn Patzkowsky**  
Full Name (Last, First, Middle Initial)  
Mailing Address 133 Narrows Peak Circle

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

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

Name of Employer HealthSouth	Occupation Director of Income Tax Compliance
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.17031**

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

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

Name of Employer HealthSouth	Occupation Director of Income Tax Compliance
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

**Transaction ID : SA11Al.17073**

Amount of Each Receipt this Period  

120.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>160.00</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 51
<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. Dawn S. Pearson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22 Linda Lane

City Egg Harbor Township	State NJ	Zip Code 08234
-----------------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Human Resources Director
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11AI.16947**

Amount of Each Receipt this Period  

1000	900	800	700	600	500	400	300	200	100	0
										20.00

Payroll Deduction (\$20, 2 weeks)

**B. Dawn S. Pearson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22 Linda Lane

City Egg Harbor Township	State NJ	Zip Code 08234
-----------------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Human Resources Director
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11AI.17032**

Amount of Each Receipt this Period  

1000	900	800	700	600	500	400	300	200	100	0
										20.00

Payroll Deduction (\$20, 2 weeks)

**C. 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 ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11AI.16899**

Amount of Each Receipt this Period  

1000	900	800	700	600	500	400	300	200	100	0
										15.00

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>55.00</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 51
	<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

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. 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 **285.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11AI.17033**  
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 HealthSouth Corporation Occupation Healthcare Facility Administrator  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **430.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11AI.16949**  
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 HealthSouth Corporation Occupation Healthcare Facility Administrator  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **440.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11AI.17036**  
Amount of Each Receipt this Period **10.00**  
Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 51
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address 1379 East Island Place

City Memphis	State TN	Zip Code 38103
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Director of Corporate Recruiting
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16902**

Amount of Each Receipt this Period  

120.00
--------

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 1379 East Island Place

City Memphis	State TN	Zip Code 38103
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Director of Corporate Recruiting
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.17038**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1740.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16903**

Amount of Each Receipt this Period  

80.00
-------

Payroll Deduction (\$80, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>120.00</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 37 OF 51
	<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 Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1820.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17039**

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 16654 West Moreland Street

City Goodyear State AZ Zip Code 85338

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

Name of Employer HealthSouth Corporation Occupation Regional Director Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11Al.16950**

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 Goodyear State AZ Zip Code 85338

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

Name of Employer HealthSouth Corporation Occupation Regional Director Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17040**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 204 Lyttleton Way

City Anderson State SC Zip Code 29621

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 ▼ **210.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17047**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

**B. 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 ▼ **270.00**

Date of Receipt **09 / 26 / 2013**

**Transaction ID : SA11Al.16909**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 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 ▼ **285.00**

Date of Receipt **09 / 27 / 2013**

**Transaction ID : SA11Al.17049**

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 39 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16912**

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 ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.17052**

Amount of Each Receipt this Period  

15.00
-------

Payroll Deduction (\$15, 2 weeks)

**C. Mark J Tarr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 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 ▼ **2070.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16913**

Amount of Each Receipt this Period  

115.00
--------

Payroll Deduction (\$115, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>145.00</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 40 OF 51
	<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. Mark J Tarr**

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 ▼ **2185.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Al.17053**

Amount of Each Receipt this Period  
**115.00**

Payroll Deduction (\$115, 2 weeks)

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

Mailing Address 177 Wisteria Dr.

City Chelsea State AL Zip Code 35043

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Al.16914**

Amount of Each Receipt this Period  
**15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 177 Wisteria Dr.

City Chelsea State AL Zip Code 35043

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Al.17054**

Amount of Each Receipt this Period  
**15.00**

Payroll Deduction (\$15, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>145.00</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 41 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

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  
 09 / 26 / 2013  
**Transaction ID : SA11AI.16954**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11AI.17056**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20, 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 ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11AI.16955**

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: (check only one)	PAGE 42 OF 51
	<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. 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 ▼  
285.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.17057**

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 ▼  
342.00

Date of Receipt  
09 / 26 / 2013  
**Transaction ID : SA11AI.16956**

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 ▼  
361.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11AI.17058**

Amount of Each Receipt this Period  
19.00

Payroll Deduction (\$19, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 53.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 51
<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. 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 ▼  
535.50

Date of Receipt  
09 / 26 / 2013  
**Transaction ID : SA11Al.16916**

Amount of Each Receipt this Period  
28.50

Payroll Deduction (\$28.50, 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 ▼  
564.00

Date of Receipt  
09 / 27 / 2013  
**Transaction ID : SA11Al.17059**

Amount of Each Receipt this Period  
28.50

Payroll Deduction (\$28.50, 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 ▼  
3197.34

Date of Receipt  
09 / 26 / 2013  
**Transaction ID : SA11Al.16919**

Amount of Each Receipt this Period  
177.63

Payroll Deduction (\$177.63, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 234.63

**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 44 OF 51
	<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

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. 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 ▼ **3374.97**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11Al.17062**

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 ▼ **1260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11Al.16920**

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 ▼ **1330.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11Al.17063**

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 45 OF 51
<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. 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 ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16921**

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 ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SA11Al.17064**

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 ▼ **1384.56**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

**Transaction ID : SA11Al.16922**

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 46 OF 51
<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. 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 ▼ **1461.48**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.17065**  
 Amount of Each Receipt this Period **76.92**  
 Payroll Deduction (\$76.92, 2 weeks)

**B. John Ryan Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2016 Eagle Valley Drive  
 City Birmingham State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation VP of Managed Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **216.00**

Date of Receipt **09 / 26 / 2013**  
**Transaction ID : SA11Al.16923**  
 Amount of Each Receipt this Period **12.00**  
 Payroll Deduction (\$12, 2 weeks)

**C. John Ryan Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2016 Eagle Valley Drive  
 City Birmingham State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation VP of Managed Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **228.00**

Date of Receipt **09 / 27 / 2013**  
**Transaction ID : SA11Al.17066**  
 Amount of Each Receipt this Period **12.00**  
 Payroll Deduction (\$12, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.92</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 47 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11Al.16924**

Amount of Each Receipt this Period  
**25.00**

Payroll Deduction (\$25, 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 ▼ **475.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11Al.17067**

Amount of Each Receipt this Period  
**25.00**

Payroll Deduction (\$25, 2 weeks)

**C. William Wittig**  
Full Name (Last, First, Middle Initial)

Mailing Address 656 Bluff Park Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Director, Contract Management

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  
 09 / 27 / 2013  
**Transaction ID : SA11Al.17068**

Amount of Each Receipt this Period  
**15.00**

Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional)..... **65.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

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

Full Name (Last, First, Middle Initial)  
**A. Russell Yeager**

Mailing Address 628 Springbank Terrace

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

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

Name of Employer HealthSouth	Occupation VP Technology
---------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
399.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2013  
**Transaction ID : SA11Al.16926**

Amount of Each Receipt this Period  
38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)  
**B. Russell Yeager**

Mailing Address 628 Springbank Terrace

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

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

Name of Employer HealthSouth	Occupation VP Technology
---------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
437.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2013  
**Transaction ID : SA11Al.17069**

Amount of Each Receipt this Period  
38.00

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4762.10



**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

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. ADRIAN SMITH FOR CONGRESS**

Mailing Address 3321 AVENUE I  
SUITE 6

City SCOTTSBLUFF State NE Zip Code 69361

Purpose of Disbursement

Candidate Name

**ADRIAN SMITH**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NE District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	3

**Transaction ID : SB23.16842**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. DAVE CAMP FOR CONGRESS**

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement

Candidate Name

**DAVID LEE CAMP**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	3

**Transaction ID : SB23.16841**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)**

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 245

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	3

**Transaction ID : SB23.16840**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

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

8	0	0	0	0	0	0	0	0	0

8	0	0	0	0	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

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. ROTHFUS FOR CONGRESS

Mailing Address PO BOX 435

City SEWICKLEY State PA Zip Code 15143

Purpose of Disbursement

Candidate Name

**KEITH MR. ROTHFUS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : SB23.16718

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

2000.00
---------

10000.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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. HealthSouth Corporation**

Mailing Address 3660 Grandview Parkway  
Suite 200

City Birmingham State AL Zip Code 35243

Purpose of Disbursement  
Solicitation Mailing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.16843**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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