

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
HealthSouth Corporation Political Action Committee

ADDRESS (number and street) 3660 Grandview Parkway, Suite 200
 Check if different than previously reported. (ACC)
Birmingham AL 35243

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 01 2009 through 10 31 2009

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 Electronically Filed by Edmund M. Fay Date 11 19 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		15752.89
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	23219.65									
(c) Total Receipts (from Line 19)	3854.74	82300.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27074.39	98053.13								
7. Total Disbursements (from Line 31)	7510.00	78488.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19564.39	19564.39								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	3482.55	56984.41
(ii) Unitemized	372.19	20815.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3854.74	77800.24
(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)	3854.74	77800.24
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	4500.00
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 Transfer (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))	3854.74	82300.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3854.74	82300.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	10.00	1988.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	10.00	1988.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	76500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00
(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	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	7510.00	78488.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7510.00	78488.74

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	3854.74	77800.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3854.74	77800.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	1988.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10.00	1988.74

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

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

FOR LINE NUMBER: PAGE 6 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
James A. Allen

Mailing Address 436 Golf Drive

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation VP Operations Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10399

Amount of Each Receipt this Period 33.00

Payroll Deduction (\$33, 2 weeks)

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

Mailing Address 10154 S Bannor Hill Road

City Sandy State UT Zip Code 84092

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 ▼ 315.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10496

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 792 West Aaron Drive

City State College State PA Zip Code 16803

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10401

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 58.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Donna C. Anderson

Mailing Address 120 29th Court SW

City State Zip Code
Vero Beach FL 32968

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10497

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Christine Bachrach

Mailing Address 3725 Dunbarton Drive

City State Zip Code
Mountain Brook AL 35223

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation Occupation SVP Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2025.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10402

Amount of Each Receipt this Period 25.00

Payroll Deduction (\$25, 2 weeks)

C.

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

Mailing Address 58 Edgemire Place

City State Zip Code
The Woodlands TX 77381

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 ▼ 2100.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10403

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100, 2 weeks)

SUBTOTAL of Receipts This Page (optional) 140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 37
(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

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

A. Full Name (Last, First, Middle Initial)
Tony Bennett

Mailing Address 3108 Preserve Rookery Blvd

City State Zip Code
Panama City Beach FL 32408

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10406

Amount of Each Receipt this Period 12.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 175 Central Street

City State Zip Code
North Reading MA 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 ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10407

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Jeffrey P. Blackwood

Mailing Address 276 Stonebridge Road

City State Zip Code
Birmingham AL 35210

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

Name of Employer HealthSouth Corporation Occupation Director of Design & Construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10408

Amount of Each Receipt this Period 19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 51.00

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 9 / 37
(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

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

<p>A. Full Name (Last, First, Middle Initial) Cherie J. Bleigh</p> <p>Mailing Address 1713 Redwing Drive</p> <p>City State Zip Code Palm Beach FL 33480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Director of Risk</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 252.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.10409</p> <p>Amount of Each Receipt this Period 12.00</p> <p>Payroll Deduction (\$12, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) Phylis A. Buck</p> <p>Mailing Address PO Box 770068</p> <p>City State Zip Code Memphis TN 38177</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Hospital Controller</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.10411</p> <p>Amount of Each Receipt this Period 10.00</p> <p>Payroll Deduction (\$10, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) Michael L. Bullitt</p> <p>Mailing Address 3711 Kessler</p> <p>City State Zip Code Wichita Falls TX 76309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 252.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.10501</p> <p>Amount of Each Receipt this Period 12.00</p> <p>Payroll Deduction (\$12, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	9												

SUBTOTAL of Receipts This Page (optional)	34.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Barbara L. Butler

Mailing Address 2444 Oak Bend Place

City State Zip Code
Newburgh IN 47630

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 ▼ 410.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10412

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

B.

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

Mailing Address 3609 Ridgecrest Road

City State Zip Code
Birmingham AL 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 ▼ 504.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10413

Amount of Each Receipt this Period 24.00

Payroll Deduction (\$24, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Dr. Dexanne B. Clohan

Mailing Address 2351 River Grand Drive

City State Zip Code
Birmingham AL 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 ▼ 4032.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10414

Amount of Each Receipt this Period 192.00

Payroll Deduction (\$192, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 226.00

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

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

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

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

A.	Full Name (Last, First, Middle Initial) Kevin R. Conn		Date of Receipt
	Mailing Address 10456 N.W. 48th Manor		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Coral Springs	FL	33076
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10415
Name of Employer HealthSouth Corporation		Occupation Vice President - Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 20.00
			Payroll Deduction (\$20, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Kristen DeHart		Date of Receipt
	Mailing Address 1542 Canterbury Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Liberty	MO	64068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10419
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 20.00
			Payroll Deduction (\$20, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Catherine V. Devaney		Date of Receipt
	Mailing Address 19 Buckingham Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Bow	NH	03304
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10420
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00	<input type="text"/> 15.00
			Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 55.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Josephine Douglas

Mailing Address 3 Asheville Street

City State Zip Code
Toms River NJ 08753

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 ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10422

Amount of Each Receipt this Period 12.00

Payroll Deduction (\$12, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Elaine Ebaugh

Mailing Address 4331 38th Way S.

City State Zip Code
St. Petersburg FL 33711

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 ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10503

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Danny Edwards

Mailing Address 1112 Hunt Club Lane

City State Zip Code
Valrico FL 33594

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10504

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 42.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Daniel A. Eppley

Mailing Address 5236 Manorwood Drive

City State Zip Code
Sarasota FL 34235

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 ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10505

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B.

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

Mailing Address 527 Valley Road

City State Zip Code
Birmingham AL 35206

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

Name of Employer Occupation
HealthSouth Corporation SVP Treasury

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1570.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10423

Amount of Each Receipt this Period
70.00

Payroll Deduction (\$70, 2 weeks)

C.

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

Mailing Address 1930 East Claire Drive

City State Zip Code
Phoenix AZ 85022

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

Name of Employer Occupation
HealthSouth Corporation Director of Therapy Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10424

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 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: PAGE 14 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 400 Ruskin Drive

City State Zip Code
Altoona PA 16602

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: SA11AI.10425

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Denice Gaffney

Mailing Address 91 Parker Avenue

City State Zip Code
Manasquan NJ 08736

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: SA11AI.10426

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Deborah L. Gerke

Mailing Address 9320 Sienna Ridge Drive

City State Zip Code
Las Vegas NV 89117

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

Name of Employer HealthSouth Corporation Occupation Hospital Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: SA11AI.10506

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Brenda Gosney

Mailing Address 968 Nagel Road

City State Zip Code
Butler KY 41006

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 ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10507

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20, 2 weeks)

B.

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

Mailing Address 7130 East Saddleback Street
Apt. 56

City State Zip Code
Mesa AZ 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 ▼ 3176.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10427

Amount of Each Receipt this Period 56.00

Payroll Deduction (\$56, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Rebecca Holmes

Mailing Address 115 Breeze Ridge

City State Zip Code
Narrows VA 24124

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

Name of Employer Healthsouth Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10429

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 86.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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 ▼ 567.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10430
 Amount of Each Receipt this Period 27.00
 Payroll Deduction (\$27, 2 weeks)

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

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 ▼ 2340.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10432
 Amount of Each Receipt this Period 40.00
 Payroll Deduction (\$40, 2 weeks)

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

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 ▼ 315.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10433
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 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 17 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Barbara Jacobsmeyer	Date of Receipt MM / DD / YYYY 10 / 13 / 2009
	Mailing Address 3908 Herman's Lake Ct	Transaction ID: SA11AI.10434
	City State Zip Code Florissant MO 63034	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)
	Name of Employer HealthSouth Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00

B.	Full Name (Last, First, Middle Initial) Robert F. Jernigan	Date of Receipt MM / DD / YYYY 10 / 13 / 2009
	Mailing Address 1220 Greensward Drive	Transaction ID: SA11AI.10509
	City State Zip Code Tallahassee FL 32312	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25, 2 weeks)
	Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00

C.	Full Name (Last, First, Middle Initial) Gregory M. Johnston	Date of Receipt MM / DD / YYYY 10 / 13 / 2009
	Mailing Address 840 Gardener Road	Transaction ID: SA11AI.10510
	City State Zip Code Rockledge FL 32955	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)
	Name of Employer HealthSouth Corporation Occupation Director of Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Jill Jordan

Mailing Address 443 Lee Road 2099

City State Zip Code
Phenix City AL 36870

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

Transaction ID: SA11AI.10435

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Cynthia Ann Kelleher

Mailing Address 1878 Disney Estates Circle

City State Zip Code
Severn MD 21144

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

Name of Employer HealthSouth Corporation Occupation VP of Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.10525

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Sylvia Kelly

Mailing Address 51 Paa-Ko Drive

City State Zip Code
Sandia Park NM 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 ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10511

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► **1025.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Ardith Kiely

Mailing Address PO Box 9467

City State Zip Code
Newport Beach CA 92658

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

Name of Employer Healthsouth Occupation Pharmacy Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10437

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B.

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

Mailing Address 808 Parkview Circle

City State Zip Code
Birmingham AL 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 ▼ 1218.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10438

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Brian Kubiel

Mailing Address 1026 Kaitlyn Court

City State Zip Code
Toms River NJ 08753

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

Name of Employer HealthSouth Corporation Occupation Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10439

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► **78.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Thomas Langley		Date of Receipt
	Mailing Address 1203 Elm Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Alabaster	AL	35007
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10440
Name of Employer Healthsouth		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00	<input type="text"/> 50.00
			Payroll Deduction (\$50, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Carol Lynne Lee		Date of Receipt
	Mailing Address 1811 Martin St So		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Pell City	AL	35128
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10441
Name of Employer HealthSouth		Occupation Director of Risk Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	<input type="text"/> 10.00
			Payroll Deduction (\$10, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Robert Leech		Date of Receipt
	Mailing Address 8945 Evening Grove Cr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Cordova	TN	38018
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10442
Name of Employer HealthSoth		Occupation VP, Home Health Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 20.00
			Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 80.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Phillip E. Loggins		Date of Receipt
	Mailing Address 5022 McLaughlin Drive		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tallahassee	FL	32309
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10513
Name of Employer HealthSouth Corporation		Occupation Director of Risk	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="315.00"/>	<input type="text" value="15.00"/>
			Payroll Deduction (\$15, 2 weeks)

B.	Full Name (Last, First, Middle Initial) William P. Macri		Date of Receipt
	Mailing Address 417 Lackey Road		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Martin	TN	38237
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10445
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	<input type="text" value="10.00"/>
			Payroll Deduction (\$10, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Peter M. Mantegazza		Date of Receipt
	Mailing Address 38 Madeline Drive		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ridgefield	CT	06877
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10446
Name of Employer HealthSouth Corporation		Occupation Regional President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="266.00"/>	<input type="text" value="38.00"/>
			Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="63.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Terry R Maxhimer		Date of Receipt
	Mailing Address 4817 Wood Springs Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Birmingham	AL	35226
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10447
Name of Employer HealthSouth		Occupation SVP Inpatient Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1575.00	<input type="text"/> 75.00
			Payroll Deduction (\$75, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Brannon McDaniel		Date of Receipt
	Mailing Address 801 Lake Vista Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Birmingham	AL	35242
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10448
Name of Employer HealthSouth Corporation		Occupation VP of IT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 20.00
			Payroll Deduction (\$20, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Denise B. McGrath		Date of Receipt
	Mailing Address 222 River Walk Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Melbourne Beach	FL	32951
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10515
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00	<input type="text"/> 15.00
			Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 37
(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

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

<p>A. Full Name (Last, First, Middle Initial) Monnie Moore</p> <p>Mailing Address 904 Southpoint Circle</p> <p>City State Zip Code Morgantown WV 26501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Director of Pharmacy</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 13 / 2009</p> <p>Transaction ID: SA11AI.10450</p> <p>Amount of Each Receipt this Period 10.00</p> <p>Payroll Deduction (\$10, 2 weeks)</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Wanda Morales</p> <p>Mailing Address 309 Chapelwood Drive</p> <p>City State Zip Code Dothan AL 36303</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Occupation Director of Quality</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 13 / 2009</p> <p>Transaction ID: SA11AI.10451</p> <p>Amount of Each Receipt this Period 20.00</p> <p>Payroll Deduction (\$20, 2 weeks)</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Ed Mowen</p> <p>Mailing Address 8613 Highlands Drive</p> <p>City State Zip Code Trussville AL 35173</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Occupation Regional Controller</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 13 / 2009</p> <p>Transaction ID: SA11AI.10452</p> <p>Amount of Each Receipt this Period 15.00</p> <p>Payroll Deduction (\$15, 2 weeks)</p>
---	---

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 37
(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

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

A.

Full Name (Last, First, Middle Initial) Sandra Murvin		Date of Receipt MM / DD / YYYY 10 / 13 / 2009
Mailing Address 1831 28th Ave South Suite 330		Transaction ID: SA11AI.10454
City Birmingham	State AL	Zip Code 35209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer HealthSouth	Occupation Vice President	Payroll Deduction (\$40, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00	

B.

Full Name (Last, First, Middle Initial) Martin O'Neil		Date of Receipt MM / DD / YYYY 10 / 13 / 2009
Mailing Address 11853 104th Lane North		Transaction ID: SA11AI.10516
City Largo	State FL	Zip Code 33773
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer HealthSouth Corporation	Occupation Director of Marketing	Payroll Deduction (\$25, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C.

Full Name (Last, First, Middle Initial) Patricia Ostaszewski		Date of Receipt MM / DD / YYYY 10 / 13 / 2009
Mailing Address 54 Bay Way Drive		Transaction ID: SA11AI.10456
City Brick	State NJ	Zip Code 08723
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer HealthSouth	Occupation VP Operations	Payroll Deduction (\$25, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

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: PAGE 25 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Shawn Patzkowsky

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 ▼ 420.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10457
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Gary Payne

Mailing Address 2401 N Slick Rock

City Columbia State MO Zip Code 65202

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 ▼ 420.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10458
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Doni Y. Phillips

Mailing Address 5816 Winchester

City Texarkana State TX Zip Code 75503

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

Name of Employer Healthsouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10517
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 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 26 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Donna M. Phillips		Date of Receipt
	Mailing Address 2518 Belmont Terrace #2A		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Fredericksburg	VA	22401
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10518
Name of Employer HealhtSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 210.00	Payroll Deduction (\$10, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Troy Powell		Date of Receipt
	Mailing Address 103 History Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Summerville	SC	29485
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10460
Name of Employer Healthsouth		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 210.00	Payroll Deduction (\$10, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Mark J Rice		Date of Receipt
	Mailing Address 182 Jill Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Ruston	LA	71270
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10462
Name of Employer HealthSouth		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 15.00
		<input type="text"/> 315.00	Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 35.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) James H Rogers		Date of Receipt
	Mailing Address 84 Downing Street		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Columbia	SC	29209
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HealthSouth		Occupation Healthcare Facility Administrator	Transaction ID: SA11AI.10463
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="718.00"/>	<input type="text" value="38.00"/>
			Payroll Deduction (\$30, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Joanne Rose		Date of Receipt
	Mailing Address 750 Barkman Creek Road		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hooks	TX	75561
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Transaction ID: SA11AI.10519
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="10.00"/>
			Payroll Deduction (\$10, 2 weeks)

C.	Full Name (Last, First, Middle Initial) Robert J. Rosene		Date of Receipt
	Mailing Address 16654 West Moreland Street		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Goodyear	AZ	85338
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HealthSouth Corporation		Occupation Regional Director Human Resources	Transaction ID: SA11AI.10520
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="360.00"/>	<input type="text" value="10.00"/>
			Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="58.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Jeffrey Ruskan

Mailing Address 304 Beechwood Drive

City Richmond State VA Zip Code 23229

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 10 / 13 / 2009

Transaction ID: SA11AI.10464

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Jim Simpson

Mailing Address 4285 Lexie Circle

City Trussville State AL Zip Code 35173

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

Name of Employer Healthsouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10466

Amount of Each Receipt this Period 38.00

Payroll Deduction (\$38, 2 weeks)

C.

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

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 ▼ 420.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10467

Amount of Each Receipt this Period 20.00

Payroll deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 78.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Thomas E. Slimick

Mailing Address 3460 Indian Lake Lane

City Pelham State AL Zip Code 35124

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

Name of Employer HealthSouth Corporation Occupation Director of Investigations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10468

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
James Steinkirchner

Mailing Address 112 Wonderly Drive

City Sarver State PA Zip Code 16055

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 ▼ 210.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10473

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Darla Summerville

Mailing Address 219 Piper Street

City Lilly State PA Zip Code 15938

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

Name of Employer HealthSouth Occupation Director of Case Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10474

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: PAGE 30 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Dean Taggart
 Mailing Address 704 Guardbridge Court
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00
 Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10475
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

B. Full Name (Last, First, Middle Initial)
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 ▼ 2415.00
 Date of Receipt 10 / 13 / 2009
Transaction ID: SA11AI.10476
 Amount of Each Receipt this Period 115.00
 Payroll Deduction (\$115, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Curtis H. Traylor
 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 10 / 13 / 2009
Transaction ID: SA11AI.10523
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 135.00
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 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
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 HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt

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

Transaction ID: SA11AI.10524

Amount of Each Receipt this Period 15.00

Payroll Deduction (\$15, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Sandra Kaye Vollman

Mailing Address 2908 Glenstone Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation Senior VP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1340.00

Date of Receipt

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

Transaction ID: SA11AI.10479

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 1100 27th Street South #1004

City State Zip Code
Birmingham AL 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 ▼ 330.00

Date of Receipt

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

Transaction ID: SA11AI.10480

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► **85.00**

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 32 / 37
(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

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

A.

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

Mailing Address 2660 Piedmont Dr

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 13 / 2009
Transaction ID: SA11AI.10483
Amount of Each Receipt this Period: 10.00
Payroll Deduction (\$10, 2 weeks)

B.

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

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 ▼ 3203.93

Date of Receipt: 10 / 13 / 2009
Transaction ID: SA11AI.10484
Amount of Each Receipt this Period: 177.63
Payroll Deduction (\$177.6-3, 2 weeks)

C.

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

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 ▼ 798.00

Date of Receipt: 10 / 13 / 2009
Transaction ID: SA11AI.10485
Amount of Each Receipt this Period: 38.00
Payroll Deduction (38, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 225.63

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: PAGE 33 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Traci Leann Willis

Mailing Address 8147 Fleets Run Dr

City State Zip Code
Memphis TN 38018

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

Transaction ID: SA11AI.10486

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Arthur E Wilson, Jr.

Mailing Address 5947 South Shades Crest Rd

City State Zip Code
Bessemer AL 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 ▼ 1615.32

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10487

Amount of Each Receipt this Period 76.92

Payroll Deduction (\$76.92, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Chris Winchester

Mailing Address 384 Greystone Glen Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation Director of Compensation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10489

Amount of Each Receipt this Period 25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► **111.92**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 37
(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

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

A.

Full Name (Last, First, Middle Initial)
Robert M Wisner

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10490

Amount of Each Receipt this Period 25.00

Payroll Deduction (\$25, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
William Wittig

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 10 / 13 / 2009

Transaction ID: SA11AI.10491

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Daniel B Woloszyn

Mailing Address 937 Angle Tarn

City West Dundee State IL Zip Code 60118

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 ▼ 260.00

Date of Receipt 10 / 13 / 2009

Transaction ID: SA11AI.10492

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: PAGE 35 / 37
(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

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

A.

Full Name (Last, First, Middle Initial) John Workman		Date of Receipt MM / DD / YYYY 10 / 13 / 2009
Mailing Address 7054 North Highfield Dr		Transaction ID: SA11AI.10493
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer HealthSouth	Occupation CFO	Payroll Deduction (\$150, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	

B.

Full Name (Last, First, Middle Initial) Russell Yeager		Date of Receipt MM / DD / YYYY 10 / 13 / 2009
Mailing Address 628 Springbank Terrace		Transaction ID: SA11AI.10494
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer HealthSouth	Occupation VP Technology	Payroll Deduction (\$19, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

SUBTOTAL of Receipts This Page (optional)	▶	169.00
TOTAL This Period (last page this line number only)	▶	3482.55

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) BILL NELSON FOR U S SENATE	Transaction ID: SB23.10527 Date of Disbursement
	Mailing Address 500 RED SAIL WAY	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City SATELITE BEACH State FL Zip Code 32937	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name BILL NELSON	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)	Transaction ID: SB23.10534 Date of Disbursement
	Mailing Address 801 PENNSYLVANIA AVENUE SUITE 245	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="3000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FORWARD TOGETHER PAC	Transaction ID: SB23.10528 Date of Disbursement
	Mailing Address 201 North Union Street Suite 300	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITTEE			Transaction ID: SB23.10530	
	Mailing Address P.O. Box 8331			Date of Disbursement 10 / 07 / 2009	
	City Fremont	State CA	Zip Code 94537	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement			Category/ Type	
	Candidate Name FORTNEY P. STARK				
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: CA		District: 13		

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

7500.00