

**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

Check if different than previously reported. (ACC) Birmingham AL 35243

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00414649 3. IS THIS REPORT [X] NEW (N) OR [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (b) Monthly Report Due On: [] Feb 20 (M2) [] May 20 (M5) [] Aug 20 (M8) [] Nov 20 (M11) (Non-Election Year Only)

(a) Quarterly Reports: [] April 15 Quarterly Report (Q1) [] July 15 Quarterly Report (Q2) [] October 15 Quarterly Report (Q3) [] January 31 Year-End Report (YE) [] July 31 Mid-Year Report (Non-election Year Only) (MY) [] Termination Report (TER)

(c) 12-Day PRE-Election Report for the: [] Primary (12P) [] General (12G) [] Runoff (12R) [] Convention (12C) [] Special (12S)

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 [] / [] / [] 2013 through [] / [] / [] 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 12 / 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"/>		30361.64
(b) Cash on Hand at Beginning of Reporting Period.....	22944.58	
(c) Total Receipts (from Line 19)	5206.48	85978.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	28151.06	116339.90
7. Total Disbursements (from Line 31).....	4000.00	92188.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	24151.06	24151.06
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4892.10	61266.23
(ii) Unitemized	314.38	21212.03
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5206.48	82478.26
(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)	5206.48	82478.26
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))..... ▶	5206.48	85978.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5206.48	85978.26

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.....	4000.00	91000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	260.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	260.00
29. Other Disbursements	0.00	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)) ..	4000.00	92188.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	92188.84

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)	5206.48	82478.26
34. Total Contribution Refunds (from Line 28(d))	0.00	260.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5206.48	82218.26
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 67
	<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 ▼ 460.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11AI.17433
 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 ▼ 480.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11AI.17548
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Steven L. Alwine
 Full Name (Last, First, Middle Initial)
 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 ▼ 230.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11AI.17434
 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 7 OF 67
	<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. Steven L. Alwine
 Full Name (Last, First, Middle Initial)
 Mailing Address 792 West Aaron Drive
 City State Zip Code
 State College PA 16803
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11Al.17549
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

B. 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 ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2013
Transaction ID : SA11Al.17436
 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 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 ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11Al.17551
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 67
	<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. Tony Bennett
Full Name (Last, First, Middle Initial)

Mailing Address 3108 Preserve Rookery Blvd

City Panama City Beach	State FL	Zip Code 32408
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17438

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 Panama City Beach	State FL	Zip Code 32408
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.17553

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 175 Central Street

City North Reading	State MA	Zip Code 01864
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Regional Director of Managed Care
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17439

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 175 Central Street

City North Reading State MA Zip Code 01864

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

Name of Employer HealthSouth Corporation Occupation Regional Director of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.17554

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

B. Marcus John Braz
Full Name (Last, First, Middle Initial)

Mailing Address 8291 Deerbrook Circle

City Sarasota State FL Zip Code 34238

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11AI.17441

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 ▼ **480.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.17556

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 10 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17442

Amount of Each Receipt this Period

80.00	80.00	80.00	80.00	80.00
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20.00

Payroll Deduction (\$20, 2 weeks)

B. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17557

Amount of Each Receipt this Period

80.00	80.00	80.00	80.00	80.00
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20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **920.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17443

Amount of Each Receipt this Period

40.00	40.00	40.00	40.00	40.00
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40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 67
<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. 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 ▼ **960.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17558

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

City Birmingham	State AL	Zip Code 35242
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FEC ID number of contributing federal political committee. **C**

Name of Employer Healthsouth	Occupation Healthcare Facility Administrator
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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
11	/	15	/	2013

Transaction ID : SA11Al.17444

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

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

City Birmingham	State AL	Zip Code 35242
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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 ▼ **456.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17559

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 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 12 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
-----------------	-------------	-------------------

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 ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17445

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

B. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 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 ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17560

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. 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 ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17446

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 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 13 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Michael L. Bullitt
Full Name (Last, First, Middle Initial)

Mailing Address 3711 Kessler

City State Zip Code
Wichita Falls TX 76309

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 ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2013
Transaction ID : SA11Al.17561

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 136 Providence Road

City State Zip Code
Leesville SC 29070

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

Name of Employer Occupation
HealthSouth Corporation Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 15 / 2013
Transaction ID : SA11Al.17447

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 136 Providence Road

City State Zip Code
Leesville SC 29070

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

Name of Employer Occupation
HealthSouth Corporation Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2013
Transaction ID : SA11Al.17562

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 67
	<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. Barbara L. Butler
Full Name (Last, First, Middle Initial)

Mailing Address 2444 Oak Bend Place

City Newburgh State IN Zip Code 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 ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : SA11Al.17448

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 2444 Oak Bend Place

City Newburgh State IN Zip Code 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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : SA11Al.17563

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 3609 Ridgcrest Road

City Birmingham State AL Zip Code 35223

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

Name of Employer HealthSouth Corporation Occupation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **552.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : SA11Al.17449

Amount of Each Receipt this Period
24.00

Payroll Deduction (\$24, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 67
	<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. 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 ▼ **576.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17564

Amount of Each Receipt this Period **24.00**

Payroll Deduction (\$24, 2 weeks)

B. Wayne Cermak
Full Name (Last, First, Middle Initial)

Mailing Address 10529 Hendon Street

City Austin State TX Zip Code 78748

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 ▼ **230.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17450

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Wayne Cermak
Full Name (Last, First, Middle Initial)

Mailing Address 10529 Hendon Street

City Austin State TX Zip Code 78748

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 ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17565

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **44.00**

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

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

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

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

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

Mailing Address 2351 River Grand Drive

City Birmingham State AL Zip Code 35243

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

Name of Employer HealthSouth Corporation Occupation Chief Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4416.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : **SA11Al.17452**

Amount of Each Receipt this Period **192.00**

Payroll Deduction (\$192, 2 weeks)

B. 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 ▼ **4608.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11Al.17567**

Amount of Each Receipt this Period **192.00**

Payroll Deduction (\$192, 2 weeks)

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

Mailing Address PO Box 8341

City Gray State TN Zip Code 37615

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

Name of Employer HealthSouth Corporation Occupation Hospital Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : **SA11Al.17453**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **394.00**

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 17 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Georgeanne Cole
 Mailing Address PO Box 8341
 City State Zip Code
 Gray TN 37615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital Chief Operating Officer
 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
 11 / 27 / 2013
Transaction ID : SA11AI.17568
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Kevin R. Conn
 Mailing Address 10456 N.W. 48th Manor
 City State Zip Code
 Coral Springs FL 33076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Vice President - Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2013
Transaction ID : SA11AI.17454
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)
c. Kevin R. Conn
 Mailing Address 10456 N.W. 48th Manor
 City State Zip Code
 Coral Springs FL 33076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Vice President - Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.17569
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 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 18 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **345.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17458
 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 **360.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17573
 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 **1909.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17462
 Amount of Each Receipt this Period **83.00**
 Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	113.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1992.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17577

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 ▼ **460.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17463

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 ▼ **480.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17578

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 20 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tammy E. Feuer
Full Name (Last, First, Middle Initial)
Mailing Address 73 N. Woodland Avenue

City Woodbury	State NJ	Zip Code 08096
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17464

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Tammy E. Feuer
Full Name (Last, First, Middle Initial)
Mailing Address 73 N. Woodland Avenue

City Woodbury	State NJ	Zip Code 08096
------------------	-------------	-------------------

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

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

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
11	/	27	/	2013

Transaction ID : SA11Al.17579

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Scott A. Filler
Full Name (Last, First, Middle Initial)
Mailing Address 400 Ruskin Drive

City Altoona	State PA	Zip Code 16602
-----------------	-------------	-------------------

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

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

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
11	/	15	/	2013

Transaction ID : SA11Al.17465

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 400 Ruskin Drive

City Altoona State PA Zip Code 16602

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17580

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

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 ▼ **345.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17466

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

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 ▼ **360.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17581

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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
11	/	15	/	2013

Transaction ID : SA11Al.17468

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
B. 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	Occupation
HealthSouth Corporation	Hospital 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
11	/	27	/	2013

Transaction ID : SA11Al.17583

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
C. 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	Occupation
HealthSouth Corporation	SVP Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3288.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17469

Amount of Each Receipt this Period

56.00

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	76.00
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 23 OF 67
	(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

Full Name (Last, First, Middle Initial) A. Jerry Gray		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.17584
Mailing Address 7130 East Saddleback Street Apt. 56		Amount of Each Receipt this Period 56.00 Payroll Deduction (\$56, 2 weeks)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3344.00	

Full Name (Last, First, Middle Initial) B. Nicholas David Hardin		Date of Receipt MM / DD / YYYY 11 / 15 / 2013 Transaction ID : SA11AI.17470
Mailing Address 24014 Clover Trails		Amount of Each Receipt this Period 19.00 Payroll Deduction (\$19, 2 weeks)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) C. Nicholas David Hardin		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.17585
Mailing Address 24014 Clover Trails		Amount of Each Receipt this Period 19.00 Payroll Deduction (\$19, 2 weeks)
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: <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).....▶	94.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
<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. Kevin Hardy
Full Name (Last, First, Middle Initial)

Mailing Address 1230 Buckhead Drive SW

City Vero Beach	State FL	Zip Code 32968
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17471

Amount of Each Receipt this Period

40.00	40.00	40.00	40.00	40.00
-------	-------	-------	-------	-------

10.00

Payroll Deduction (\$10, 2 weeks)

B. Kevin Hardy
Full Name (Last, First, Middle Initial)

Mailing Address 1230 Buckhead Drive SW

City Vero Beach	State FL	Zip Code 32968
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17586

Amount of Each Receipt this Period

40.00	40.00	40.00	40.00	40.00
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10.00

Payroll Deduction (\$10, 2 weeks)

C. 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 ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17473

Amount of Each Receipt this Period

40.00	40.00	40.00	40.00	40.00
-------	-------	-------	-------	-------

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
	<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. 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 ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17588

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. 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 ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17476

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 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 ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17591

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth	Occupation VP Government and Regulatory Affairs
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **920.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17477

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth	Occupation VP Government and Regulatory Affairs
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.17592

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 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 ▼ **575.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17478

Amount of Each Receipt this Period

25.00

Payroll Deduction (\$25, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 67
	<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. 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 ▼ **600.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11AI.17593

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

B. 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 ▼ **1070.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11AI.17479

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 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 ▼ **1110.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11AI.17594

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **105.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Jerry Jasper
Full Name (Last, First, Middle Initial)
Mailing Address 5911 Richmond Road #4207

City Texarkana	State TX	Zip Code 75503
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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 ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17480

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 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 ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.17595

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Gregory M. Johnston
Full Name (Last, First, Middle Initial)
Mailing Address 840 Gardener Road

City Rockledge	State FL	Zip Code 32955
-------------------	-------------	-------------------

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

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

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
11	/	15	/	2013

Transaction ID : SA11AI.17481

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 29 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Gregory M. Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 Gardener Road
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11AI.17596
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

B. Leslie Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 South Lincoln Avenue Apt. 904
 City Vineland State NJ Zip Code 08361
 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 ▼ 230.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11AI.17482
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

C. Leslie Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 South Lincoln Avenue Apt. 904
 City Vineland State NJ Zip Code 08361
 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 ▼ 240.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11AI.17597
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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
11	/	15	/	2013

Transaction ID : SA11Al.17483

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

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

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

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

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
11	/	27	/	2013

Transaction ID : SA11Al.17599

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. 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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17484

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 51 Paa-Ko Drive

City Sandia Park State NM Zip Code 87047

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17600

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 1432 Notting Hill Cove West

City Hernando State MS Zip Code 38632

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 ▼ **230.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17485

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1432 Notting Hill Cove West

City Hernando State MS Zip Code 38632

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 ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17601

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 32 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 808 Parkview Circle

City 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 ▼ **1334.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17487

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation CFO - Inpatient Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1392.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17603

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 8743 W. Tierra Buena Lane

City Peoria State AZ Zip Code 85382

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 **11 / 15 / 2013**

Transaction ID : SA11Al.17488

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **126.00**

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 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 8743 W. Tierra Buena Lane

City	State	Zip Code
Peoria	AZ	85382

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Pharmacy

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
11	/	27	/	2013

Transaction ID : SA11Al.17604

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City	State	Zip Code
Pittsburgh	PA	15243

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17489

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City	State	Zip Code
Pittsburgh	PA	15243

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17605

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Stephen D. Leasure
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17490
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

B. Stephen D. Leasure
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **480.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17606
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

C. Carol Lynne Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 Martin St So
 City Pell City State AL Zip Code 35128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Director of Risk Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **485.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17491
 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 35 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Carol Lynne Lee
Full Name (Last, First, Middle Initial)
Mailing Address 1811 Martin St So
City 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 ▼ 495.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17607
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 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 ▼ 540.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11Al.17492
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30, 2 weeks)

C. 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 ▼ 570.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17608
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 67
	<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. 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 ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : SA11Al.17493

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 5022 McLaughlin Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer HealthSouth Corporation Occupation Director of Risk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : SA11Al.17609

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 5003 Wil-Acre Drive

City Loves Park State IL Zip Code 61111

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : SA11Al.17494

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 67
	<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. Mark Lundvall
Full Name (Last, First, Middle Initial)

Mailing Address 5003 Wil-Acre Drive

City Loves Park State IL Zip Code 61111

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17610

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 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 ▼ **874.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17495

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 ▼ **912.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17611

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	86.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 67
	<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

Full Name (Last, First, Middle Initial) A. Anita Marban		Date of Receipt 11 / 15 / 2013 Transaction ID : SA11Al.17496
Mailing Address 3530 Fawn Creek Drive		Amount of Each Receipt this Period 10.00
City Kingwood	State TX	Zip Code 77339
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Anita Marban		Date of Receipt 11 / 27 / 2013 Transaction ID : SA11Al.17612
Mailing Address 3530 Fawn Creek Drive		Amount of Each Receipt this Period 10.00
City Kingwood	State TX	Zip Code 77339
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Robert W. McCallum III		Date of Receipt 11 / 15 / 2013 Transaction ID : SA11Al.17497
Mailing Address 3405 Watertown Place		Amount of Each Receipt this Period 38.00
City Vestavia Hills	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$38, 2 weeks)
Name of Employer HealthSouth Corproation	Occupation Chief Tax Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 874.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert 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 ▼ 912.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17613
 Amount of Each Receipt this Period 38.00
 Payroll Deduction (\$38, 2 weeks)

B. Maria McElroy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2709 East 8th Street
 City Tucson State AZ Zip Code 85716
 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 ▼ 230.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11Al.17498
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

C. Maria McElroy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2709 East 8th Street
 City Tucson State AZ Zip Code 85716
 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 ▼ 240.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17614
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 222 River Walk Drive

City Melbourne Beach	State FL	Zip Code 32951
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17499

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 222 River Walk Drive

City Melbourne Beach	State FL	Zip Code 32951
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17615

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 8470 Carrington Lakes Cove

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

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

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

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
11	/	15	/	2013

Transaction ID : SA11Al.17500

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 67
	<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. Matthew A. McGuire
Full Name (Last, First, Middle Initial)

Mailing Address 8470 Carrington Lakes Cove

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Director of IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17616

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Monnie Moore
Full Name (Last, First, Middle Initial)

Mailing Address 904 Southpoint Circle

City Morgantown State WV Zip Code 26501

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17501

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Monnie Moore
Full Name (Last, First, Middle Initial)

Mailing Address 904 Southpoint Circle

City Morgantown State WV Zip Code 26501

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17617

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

Name of Employer HealthSouth	Occupation Director of Quality
---------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17502

Amount of Each Receipt this Period
400.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

Name of Employer HealthSouth	Occupation Director of Quality
---------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17618

Amount of Each Receipt this Period
400.00

Payroll Deduction (\$20, 2 weeks)

C. Ed Mowen
Full Name (Last, First, Middle Initial)
Mailing Address 8613 Highlands Drive

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

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

Name of Employer HealthSouth	Occupation Regional Controller
---------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17503

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 67
	<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. 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 ▼ **2100.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17619

Amount of Each Receipt this Period **100.00**

Payroll Deduction (\$100, 2 weeks)

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

Mailing Address 1799 Slocum Avenue

City Wall State NJ Zip Code 07719

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

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17504

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1799 Slocum Avenue

City Wall State NJ Zip Code 07719

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

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17620

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 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 44 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. 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 ▼ **920.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17505

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 1831 28th Ave South
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17621

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 54 Bay Way Drive

City Brick State NJ Zip Code 08723

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

Name of Employer HealthSouth Occupation VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17507

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30, 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 45 OF 67
<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. 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 ▼ **630.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17623
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30, 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 ▼ **580.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17508
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 ▼ **600.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17624
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 67
	<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. 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 ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17509

Amount of Each Receipt this Period
120.00

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 ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.17625

Amount of Each Receipt this Period
120.00

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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11AI.17510

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 47 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. 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 ▼ **360.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17626

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

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 ▼ **230.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17512

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

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 ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17628

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 48 OF 67
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. 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 ▼ **480.00**

Date of Receipt: 11 / 15 / 2013
Transaction ID : SA11AI.17513

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 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 ▼ **490.00**

Date of Receipt: 11 / 27 / 2013
Transaction ID : SA11AI.17629

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 103 History Lane

City Summerville State SC Zip Code 29485

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

Name of Employer: Healthsouth
Occupation: Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: 11 / 15 / 2013
Transaction ID : SA11AI.17514

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 67
<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. Troy Powell
Full Name (Last, First, Middle Initial)
Mailing Address 103 History Lane
City Summerville State SC Zip Code 29485
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthsouth Occupation Healthcare Facility Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17630
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 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 ▼ 385.00

Date of Receipt 11 / 15 / 2013
Transaction ID : SA11Al.17515
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

C. William W. Poynter
Full Name (Last, First, Middle Initial)
Mailing Address 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 ▼ 405.00

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11Al.17631
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 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 50 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2140.00**

Date of Receipt
11 / 15 / 2013
Transaction ID : SA11Al.17516

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2220.00**

Date of Receipt
11 / 27 / 2013
Transaction ID : SA11Al.17632

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
11 / 15 / 2013
Transaction ID : SA11Al.17517

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17633

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 12005 Wesford Drive

City	State	Zip Code
Maryland Heights	MO	63043

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Managed Care

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
11	/	15	/	2013

Transaction ID : SA11Al.17520

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 12005 Wesford Drive

City	State	Zip Code
Maryland Heights	MO	63043

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Managed Care

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
11	/	27	/	2013

Transaction ID : SA11Al.17635

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 52 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 8331 Chinaberry Road

City Vero Beach State FL Zip Code 32964

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 ▼ **230.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : **SA11AI.17523**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Carol Sim
Full Name (Last, First, Middle Initial)

Mailing Address 8331 Chinaberry Road

City Vero Beach State FL Zip Code 32964

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 ▼ **240.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11AI.17638**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. 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 ▼ **290.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : **SA11AI.17524**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 67
	<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. 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 ▼ **310.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17639
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

B. Lisa Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Conroy Road
 City Sterret State AL Zip Code 35147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17525
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

C. Lisa Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Conroy Road
 City Sterret State AL Zip Code 35147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17640
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 67
<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. 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 ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17526

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 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 ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17641

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. Karen Spencer
Full Name (Last, First, Middle Initial)

Mailing Address 2520 Oakleaf Circle

City Bessemer	State AL	Zip Code 35022
------------------	-------------	-------------------

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

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

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
11	/	15	/	2013

Transaction ID : SA11Al.17527

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 67
	<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. Karen Spencer
Full Name (Last, First, Middle Initial)
Mailing Address 2520 Oakleaf Circle

City Bessemer	State AL	Zip Code 35022
------------------	-------------	-------------------

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

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

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
11	/	27	/	2013

Transaction ID : SA11Al.17642

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Darla Summerville
Full Name (Last, First, Middle Initial)
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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17528

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Darla Summerville
Full Name (Last, First, Middle Initial)
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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17643

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 67
<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. 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 ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17529

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 ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17644

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 ▼ **2645.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17530

Amount of Each Receipt this Period

115.00

Payroll Deduction (\$115, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 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 ▼ **2760.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17645

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 ▼ **300.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17531

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 ▼ **315.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17646

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ► **145.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 67
<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. 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 ▼ **310.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11AI.17533

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 ▼ **330.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.17648

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 ▼ **345.00**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11AI.17534

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 59 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 109 West Hoskins Street

City State Zip Code
New Boston TX 75570

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
11 / 27 / 2013
Transaction ID : SA11Al.17649

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 ▼
437.00

Date of Receipt
11 / 15 / 2013
Transaction ID : SA11Al.17535

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 ▼
456.00

Date of Receipt
11 / 27 / 2013
Transaction ID : SA11Al.17650

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 60 OF 67
<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. 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 ▼ **678.00**

Date of Receipt
11 / 15 / 2013
Transaction ID : **SA11Al.17536**

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 ▼ **706.50**

Date of Receipt
11 / 27 / 2013
Transaction ID : **SA11Al.17651**

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

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

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 ▼ **230.00**

Date of Receipt
11 / 15 / 2013
Transaction ID : **SA11Al.17538**

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **67.00**

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 61 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 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 ▼ **240.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17653

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4085.49**

Date of Receipt **11 / 15 / 2013**

Transaction ID : SA11Al.17539

Amount of Each Receipt this Period **177.63**

Payroll Deduction (\$177.63, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4263.12**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11Al.17654

Amount of Each Receipt this Period **177.63**

Payroll Deduction (\$177.63, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **365.26**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Linda Masone Wilder		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 Transaction ID : SA11Al.17540
Mailing Address 2335 Ridge Trail		Amount of Each Receipt this Period 70.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$70, 2 weeks)	
Name of Employer HealthSouth	Occupation Senior VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1610.00	

Full Name (Last, First, Middle Initial) B. Linda Masone Wilder		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11Al.17655
Mailing Address 2335 Ridge Trail		Amount of Each Receipt this Period 70.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$70, 2 weeks)	
Name of Employer HealthSouth	Occupation Senior VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.00	

Full Name (Last, First, Middle Initial) C. Donn G. Willey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 Transaction ID : SA11Al.17541
Mailing Address 123 Riverchase Trails		Amount of Each Receipt this Period 15.00
City Hoover	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation National Director of Compensation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. 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 ▼ **360.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11Al.17656**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1769.16**

Date of Receipt **11 / 15 / 2013**
Transaction ID : **SA11Al.17542**

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1846.08**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11Al.17657**

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **168.84**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 67
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. 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 ▼ **276.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2013
Transaction ID : SA11Al.17543

Amount of Each Receipt this Period
 12.00

Payroll Deduction (\$12, 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 ▼ **288.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11Al.17658

Amount of Each Receipt this Period
 12.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2013
Transaction ID : SA11Al.17544

Amount of Each Receipt this Period
 25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	49.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert 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 **600.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17659
Amount of Each Receipt this Period **25.00**
Payroll Deduction (\$25, 2 weeks)

B. 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 **270.00**

Date of Receipt **11 / 15 / 2013**
Transaction ID : SA11Al.17545
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 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 **285.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11Al.17660
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **55.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 66 OF 67
(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

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

Mailing Address 628 Springbank Terrace

City Birmingham	State AL	Zip Code 35242
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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 ▼
589.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

Transaction ID : SA11Al.17546

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 ▼
627.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.17661

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
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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
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	76.00
TOTAL This Period (last page this line number only).....▶	4892.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. MAKING AMERICA PROSPEROUS PAC

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2013

Transaction ID : SB23.17431

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. RELY ON YOUR BELIEFS FUND

Mailing Address 209 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2013

Transaction ID : SB23.17429

Amount of Each Disbursement this Period

2500.00

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

M M / 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)..... ▶

4000.00

4000.00