



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
HealthSouth Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		23643.09
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	30892.79									
(c) Total Receipts (from Line 19) .....	2574.74	16344.44								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	33467.53	39987.53								
7. Total Disbursements (from Line 31) .....	10510.00	17030.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	22957.53	22957.53								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	1142.55	4819.30
(ii) Unitemized .....	1432.19	10525.14
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2574.74	15344.44
(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) .....	2574.74	15344.44
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	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2574.74	16344.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2574.74	16344.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10.00	30.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	10.00	30.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	17000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10510.00	17030.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10510.00	17030.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	2574.74	15344.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2574.74	15344.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	30.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10.00	30.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14  
(check only one)

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

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

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

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

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 ▼ 968.00

Date of Receipt 03 / 16 / 2010

Transaction ID: SA11AI.11095

Amount of Each Receipt this Period 192.00

Payroll Deduction (\$192, 2 weeks)

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

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 ▼ 420.00

Date of Receipt 03 / 16 / 2010

Transaction ID: SA11AI.11104

Amount of Each Receipt this Period 70.00

Payroll Deduction (\$70, 2 weeks)

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

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 03 / 16 / 2010

Transaction ID: SA11AI.11108

Amount of Each Receipt this Period 56.00

Payroll Deduction (\$56, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 318.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 14  
(check only one)

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

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

**A.**

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

Mailing Address 5221 42nd Street NW

City State Zip Code  
Washington DC 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 ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2010

**Transaction ID:** SA11AI.11113

Amount of Each Receipt this Period  
40.00

Payroll Deduction (\$40, 2 weeks)

**B.**

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

Mailing Address 808 Parkview Circle

City State Zip Code  
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation CFO - Inpatient Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2010

**Transaction ID:** SA11AI.11119

Amount of Each Receipt this Period  
58.00

Payroll Deduction (\$58, 2 weeks)

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Langley

Mailing Address 1203 Elm Drive

City State Zip Code  
Alabaster AL 35007

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2010

**Transaction ID:** SA11AI.11121

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 148.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
Peter M. Mantegazza

Mailing Address 38 Madeline Drive

City State Zip Code  
Ridgefield CT 06877

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation      Occupation Regional President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt M M / D D / Y Y Y Y  
03 / 16 / 2010

**Transaction ID:** SA11AI.11127

Amount of Each Receipt this Period 38.00

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 4817 Wood Springs Ln

City State Zip Code  
Birmingham AL 35226

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth      Occupation SVP Inpatient Operations

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y  
03 / 16 / 2010

**Transaction ID:** SA11AI.11128

Amount of Each Receipt this Period 75.00

Payroll Deduction (\$75, 2 weeks)

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

Mailing Address 1831 28th Ave South Suite 330

City State Zip Code  
Birmingham AL 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 ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y  
03 / 16 / 2010

**Transaction ID:** SA11AI.11136

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... 153.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 14

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
James H Rogers

Mailing Address 84 Downing Street

City State Zip Code  
Columbia SC 29209

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

Name of Employer Occupation  
HealthSouth Healthcare Facility Administrator

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 228.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11145

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

**B.**

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

Mailing Address 4285 Lexie Circle

City State Zip Code  
Trussville AL 35173

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

Name of Employer Occupation  
Healthsouth Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 228.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11148

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

**C.**

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

Mailing Address 1039 Williams Trace

City State Zip Code  
Birmingham AL 35242

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

Name of Employer Occupation  
HealthSouth President - Inpatient Division

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 690.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11157

Amount of Each Receipt this Period

115.00

Payroll Deduction (\$115, 2 weeks)

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

191.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 14  
(check only one)

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

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

**A.**

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

Mailing Address 2908 Glenstone Circle

City State Zip Code  
Birmingham AL 35242

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

Name of Employer Occupation  
HealthSouth Senior VP Finance

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11160

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

**B.**

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

Mailing Address 2716 Watkins Glen Drive

City State Zip Code  
Birmingham AL 35216

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

Name of Employer Occupation  
HealthSouth General Counsel

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1065.78

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11165

Amount of Each Receipt this Period

177.63

Payroll Deduction (\$177.6-3, 2 weeks)

**C.**

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

Mailing Address 2335 Ridge Trail

City State Zip Code  
Birmingham AL 35242

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

Name of Employer Occupation  
HealthSouth Senior VP Operations

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 228.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.11166

Amount of Each Receipt this Period

38.00

Payroll Deduction (38, 2 weeks)

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

255.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 14	
	(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"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Arthur E Wilson, Jr.		Date of Receipt	
	Mailing Address 5947 South Shades Crest Rd		M M / D D / Y Y Y Y 03 / 16 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.11167
	Bessemer	AL	35022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	76.92
	Name of Employer HealthSouth	Occupation Senior VP Real Estate		Payroll Deduction (\$76.92, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.52		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	76.92
<b>TOTAL</b> This Period (last page this line number only) .....	1142.55

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

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

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

A.	Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS	Transaction ID: SB23.11211 Date of Disbursement
	Mailing Address 14 KNIGHTSWOOD DRIVE	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City MARLTON State NJ Zip Code 08053	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name JOHN H. ADLER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ALAMO PAC	Transaction ID: SB23.11202 Date of Disbursement
	Mailing Address 919 CONGRESS AVE SUITE 1400 FROST BANK PLAZA	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City AUSTIN State TX Zip Code 78701	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name JOHN CORNYN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BENNETT ELECTION COMMITTEE INC	Transaction ID: SB23.11207 Date of Disbursement
	Mailing Address 175 SOUTH WEST TEMPLE SUITE 650	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City SALT LAKE CITY State UT Zip Code 84101	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name ROBERT F BENNETT	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 14

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

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

A.

Full Name (Last, First, Middle Initial)  
PAT ROBERTS FOR SENATE

Transaction ID: SB23.11206

Date of Disbursement

Mailing Address PO BOX 433

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

City State Zip Code  
GREAT BEND KS 67530

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
PAT ROBERTS

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: KS District: 00

B.

Full Name (Last, First, Middle Initial)  
WASSERMAN-SCHULTZ FOR CONGRESS

Transaction ID: SB23.11217

Date of Disbursement

Mailing Address 1071 Twin Branch Ln

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

City State Zip Code  
Weston FL 33326

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
DEBBIE WASSERMAN SCHULTZ

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: FL District: 20

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

2500.00
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TOTAL This Period (last page this line number only) .....

10500.00
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