

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 11 01 2009 through 11 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Edmund M. Fay  
Signature of Treasurer Electronically Filed by Edmund M. Fay Date 01 29 2010

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

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

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

Write or Type Committee Name  
HealthSouth Corporation Political Action Committee

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		15752.89
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	19564.39									
(c) Total Receipts (from Line 19) .....	8549.22	90849.46								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	28113.61	106602.35								
7. Total Disbursements (from Line 31) .....	10010.00	88498.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18103.61	18103.61								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
HealthSouth Corporation Political Action Committee

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	7684.65	64669.06
(ii) Unitemized .....	864.57	21680.40
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	8549.22	86349.46
(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) .....	8549.22	86349.46
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	8549.22	90849.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8549.22	90849.46

**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	1998.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	10.00	1998.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	86500.00
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))..	10010.00	88498.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10010.00	88498.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	8549.22	86349.46
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8549.22	86349.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	1998.74
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10.00	1998.74

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

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

FOR LINE NUMBER: PAGE 6 / 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
James A. Allen  
 Mailing Address 436 Golf Drive  
 City Hoover State AL Zip Code 35226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation VP Operations Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 764.00  
 Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10537  
 Amount of Each Receipt this Period 99.00  
 Payroll Deduction (\$33, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Terri Alsbrook  
 Mailing Address 432 Glory Road Apt #4  
 City Blountville State TN Zip Code 37617  
 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 ▼ 216.00  
 Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10538  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**C.** Full Name (Last, First, Middle Initial)  
Steven L. Alwine  
 Mailing Address 792 West Aaron Drive  
 City State College State PA Zip Code 16803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00  
 Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10539  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 159.00  
**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 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Donna C. Anderson

Mailing Address 120 29th Court SW

City State Zip Code  
Vero Beach FL 32968

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation      Occupation Director of Human Resources

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10638

Amount of Each Receipt this Period 45.00

Payroll Deduction (\$15, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Christine Bachrach

Mailing Address 3725 Dunbarton Drive

City State Zip Code  
Mountain Brook AL 35223

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation      Occupation SVP Compliance

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10540

Amount of Each Receipt this Period 75.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 58 Edgemire Place

City State Zip Code  
The Woodlands TX 77381

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation      Occupation Healthcare Facility Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10541

Amount of Each Receipt this Period 300.00

Payroll Deduction (\$100, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... 420.00

**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 / 38  
(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)  
Thomas Batik

Mailing Address 5094 N Louis River Way

City Tucson State AZ Zip Code 85718

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 16 / 2009

Transaction ID: SA11AI.10544

Amount of Each Receipt this Period 45.00

Payroll Deduction (\$15, 2 weeks)

**B.**

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

Mailing Address 3108 Preserve Rookery Blvd

City Panama City Beach State FL Zip Code 32408

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt 11 / 16 / 2009

Transaction ID: SA11AI.10546

Amount of Each Receipt this Period 36.00

Payroll Deduction (\$12, 2 weeks)

**C.**

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

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 / 16 / 2009

Transaction ID: SA11AI.10547

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **141.00**

**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 / 38

(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)  
Jeffrey P. Blackwood

Mailing Address 276 Stonebridge Road

City State Zip Code  
Birmingham AL 35210

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

Name of Employer Occupation  
HealthSouth Corporation Director of Design & Construction

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 456.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10548

Amount of Each Receipt this Period

57.00

Payroll Deduction (\$19, 2 weeks)

**B.**

Full Name (Last, First, Middle Initial)  
Cherie J. Bleigh

Mailing Address 1713 Redwing Drive

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
HealthSouth Corporation Director of Risk

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10549

Amount of Each Receipt this Period

36.00

Payroll Deduction (\$12, 2 weeks)

**C.**

Full Name (Last, First, Middle Initial)  
Phylis A. Buck

Mailing Address PO Box 770068

City State Zip Code  
Memphis TN 38177

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 / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10551

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10, 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: PAGE 10 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Michael L. Bullitt

Mailing Address 3711 Kessler

City State Zip Code  
Wichita Falls TX 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 ▼ 288.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10642

Amount of Each Receipt this Period 36.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 2444 Oak Bend Place

City State Zip Code  
Newburgh IN 47630

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

Name of Employer HealthSouth Corporation      Occupation Healthcare Facility Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10552

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 3609 Ridgecrest Road

City State Zip Code  
Birmingham AL 35223

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

Name of Employer HealthSouth Corporation      Occupation VP Real Estate

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 576.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10553

Amount of Each Receipt this Period 72.00

Payroll Deduction (\$24, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 138.00

**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 11 / 38  
(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		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 2351 River Grand Drive		<b>Transaction ID:</b> SA11AI.10554
City Birmingham	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 576.00
Name of Employer HealthSouth Corporation	Occupation Chief Medical Officer	Payroll Deduction (\$192, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4608.00	

**B.**

Full Name (Last, First, Middle Initial) Kevin R. Conn		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 10456 N.W. 48th Manor		<b>Transaction ID:</b> SA11AI.10555
City Coral Springs	State FL	Zip Code 33076
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer HealthSouth Corporation	Occupation Vice President - Operations	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

**C.**

Full Name (Last, First, Middle Initial) Kristen DeHart		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 1542 Canterbury Lane		<b>Transaction ID:</b> SA11AI.10559
City Liberty	State MO	Zip Code 64068
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>696.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 38

(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)  
Catherine V. Devaney

Mailing Address 19 Buckingham Drive

City State Zip Code  
Bow NH 03304

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

Name of Employer Occupation  
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10560

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15, 2 weeks)

**B.**

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

Mailing Address 3 Asheville Street

City State Zip Code  
Toms River NJ 08753

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

Name of Employer Occupation  
HealthSouth Corporation Director of Therapy Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10562

Amount of Each Receipt this Period

36.00

Payroll Deduction (\$12, 2 weeks)

**C.**

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

Mailing Address 4331 38th Way S.

City State Zip Code  
St. Petersburg FL 33711

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

Name of Employer 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  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10644

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20, 2 weeks)

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

141.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 38

(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Danny Edwards		Date of Receipt MM / DD / YYYY 11 / 16 / 2009		
	Mailing Address 1112 Hunt Club Lane		<b>Transaction ID:</b> SA11AI.10645		
	City Valrico	State FL	Zip Code 33594	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$10, 2 weeks)		
	Name of Employer Healthsouth Corporation	Occupation Healthcare Facility Administrator		Aggregate Year-to-Date 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel A. Eppley		Date of Receipt MM / DD / YYYY 11 / 16 / 2009		
	Mailing Address 5236 Manorwood Drive		<b>Transaction ID:</b> SA11AI.10646		
	City Sarasota	State FL	Zip Code 34235	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$20, 2 weeks)		
	Name of Employer Healthsouth Corporation	Occupation Healthcare Facility Administrator		Aggregate Year-to-Date 480.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Edmund M. Fay		Date of Receipt MM / DD / YYYY 11 / 16 / 2009		
	Mailing Address 527 Valley Road		<b>Transaction ID:</b> SA11AI.10563		
	City Birmingham	State AL	Zip Code 35206	Amount of Each Receipt this Period 210.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$70, 2 weeks)		
	Name of Employer HealthSouth Corporation	Occupation SVP Treasury		Aggregate Year-to-Date 1780.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 38

(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara V. Feth		Date of Receipt
	Mailing Address 1930 East Claire Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Phoenix	AZ	85022
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10564
Name of Employer HealthSouth Corporation		Occupation Director of Therapy Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	<input type="text" value="60.00"/>
		Payroll Deduction (\$20, 2 weeks)	

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott A. Filler		Date of Receipt
	Mailing Address 400 Ruskin Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Altoona	PA	16602
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10565
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text" value="30.00"/>
		Payroll Deduction (\$10, 2 weeks)	

<b>C.</b>	Full Name (Last, First, Middle Initial) Denice Gaffney		Date of Receipt
	Mailing Address 91 Parker Avenue		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Manasquan	NJ	08736
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10566
Name of Employer HealthSouth Corporation		Occupation Director of Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text" value="30.00"/>
		Payroll Deduction (\$10, 2 weeks)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="120.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 38  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)  
Deborah L. Gerke

Mailing Address 9320 Sienna Ridge Drive

City State Zip Code  
Las Vegas NV 89117

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

Name of Employer HealthSouth Corporation Occupation Hospital Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10647

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**B.**

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

Mailing Address 968 Nagel Road

City State Zip Code  
Butler KY 41006

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10648

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$20, 2 weeks)

**C.**

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

Mailing Address 7130 East Saddleback Street  
Apt. 56

City State Zip Code  
Mesa AZ 85207

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

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3344.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10567

Amount of Each Receipt this Period 168.00

Payroll Deduction (\$56, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 258.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 38  
(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)  
Rebecca Holmes

Mailing Address 115 Breeze Ridge

City State Zip Code  
Narrows VA 24124

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

Name of Employer HealthSouth Occupation Director of Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10569

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**B.**

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

Mailing Address 1739 Lake Cyrus Club Drive

City State Zip Code  
Hoover AL 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 ▼ 648.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10570

Amount of Each Receipt this Period 81.00

Payroll Deduction (\$27, 2 weeks)

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Hugar

Mailing Address 74 Henning Drive

City State Zip Code  
Orchard Park NY 14127

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 ▼ 209.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10571

Amount of Each Receipt this Period 57.00

Payroll Deduction (\$19, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **168.00**

**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 / 38

(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)  
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 Occupation  
HealthSouth VP Government and Regulatory Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2460.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10572

Amount of Each Receipt this Period

120.00

Payroll Deduction (\$40, 2 weeks)

**B.**

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

Mailing Address 939 Laurel Meadow Lane

City State Zip Code  
Fort Mill SC 29708

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 ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10573

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15, 2 weeks)

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Jacobsmeyer

Mailing Address 3908 Herman's Lake Ct

City State Zip Code  
Florissant MO 63034

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 ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10574

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10, 2 weeks)

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

195.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 38  
(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)  
Robert F. Jernigan

Mailing Address 1220 Greensward Drive

City State Zip Code  
Tallahassee FL 32312

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  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10650

Amount of Each Receipt this Period 75.00

Payroll Deduction (\$25, 2 weeks)

**B.**

Full Name (Last, First, Middle Initial)  
Gregory M. Johnston

Mailing Address 840 Gardener Road

City State Zip Code  
Rockledge FL 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  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10651

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**C.**

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

Mailing Address 443 Lee Road 2099

City State Zip Code  
Phenix City AL 36870

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10575

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Sylvia Kelly

Mailing Address 51 Paa-Ko Drive

City State Zip Code  
Sandia Park NM 87047

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth Corporation      Occupation Healthcare Facility Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10652

Amount of Each Receipt this Period 45.00

Payroll Deduction (\$15, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Ardith Kiely

Mailing Address PO Box 9467

City State Zip Code  
Newport Beach CA 92658

FEC ID number of contributing federal political committee. C

Name of Employer HealthSouth      Occupation Pharmacy Director

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10577

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**C.** 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 ▼ 1392.00

Date of Receipt MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10578

Amount of Each Receipt this Period 174.00

Payroll Deduction (\$58, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... 249.00

**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 20 / 38  
(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)  
Robert Kronenberg

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 ▼ 215.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10579  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Brian Kubiel

Mailing Address 1026 Kaitlyn Court

City Toms River State NJ Zip Code 08753

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

Name of Employer HealthSouth Corporation Occupation Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10580  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1203 Elm Drive

City Alabaster State AL Zip Code 35007

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

Name of Employer Healthsouth Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10581  
 Amount of Each Receipt this Period 150.00  
 Payroll Deduction (\$50, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00

**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 21 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Carol Lynne Lee

Mailing Address 1811 Martin St So

City State Zip Code  
Pell City AL 35128

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

Name of Employer HealthSouth Occupation Director of Risk Management

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	9

**Transaction ID:** SA11AI.10582

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 8945 Evening Grove Cr

City State Zip Code  
Cordova TN 38018

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

Name of Employer HealthSoth Occupation VP, Home Health Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	9

**Transaction ID:** SA11AI.10583

Amount of Each Receipt this Period  
60.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 4426 SW Stoneybrook Drive

City State Zip Code  
Topeka KS 66610

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	9

**Transaction ID:** SA11AI.10584

Amount of Each Receipt this Period  
60.00

Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.00**

**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 22 / 38
	(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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Phillip E. Loggins		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 5022 McLaughlin Drive		<b>Transaction ID:</b> SA11AI.10653
	City Tallahassee	State FL	Zip Code 32309
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
	Name of Employer HealthSouth Corporation	Occupation Director of Risk	Payroll Deduction (\$15, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William P. Macri		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 417 Lackey Road		<b>Transaction ID:</b> SA11AI.10586
	City Martin	State TN	Zip Code 38237
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator	Payroll Deduction (\$10, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Peter M. Mantegazza		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 38 Madeline Drive		<b>Transaction ID:</b> SA11AI.10587
	City Ridgefield	State CT	Zip Code 06877
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 114.00
	Name of Employer HealthSouth Corporation	Occupation Regional President	Payroll Deduction (\$38, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	189.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 23 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Terry R Maxhimer

Mailing Address 4817 Wood Springs Ln

City Birmingham State AL Zip Code 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 ▼ 1800.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10588  
 Amount of Each Receipt this Period 225.00  
 Payroll Deduction (\$75, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Brannon McDaniel

Mailing Address 801 Lake Vista Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP of IT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10589  
 Amount of Each Receipt this Period 60.00  
 Payroll Deduction (\$20, 2 weeks)

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

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 ▼ 310.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10655  
 Amount of Each Receipt this Period 45.00  
 Payroll Deduction (\$15, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 330.00

**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 / 38
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John Miller		Date of Receipt
	Mailing Address 4112 Milner Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Birmingham	AL	35242
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10590
Name of Employer HealthSouth Corporation		Occupation Regional Director of Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 60.00
		Payroll Deduction (\$20, 2 weeks)	

<b>B.</b>	Full Name (Last, First, Middle Initial) Monnie Moore		Date of Receipt
	Mailing Address 904 Southpoint Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Morgantown	WV	26501
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10591
Name of Employer HealthSouth Corporation		Occupation Director of Pharmacy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00
		Payroll Deduction (\$10, 2 weeks)	

<b>C.</b>	Full Name (Last, First, Middle Initial) Wanda Morales		Date of Receipt
	Mailing Address 309 Chapelwood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Dothan	AL	36303
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.10592
Name of Employer HealthSouth		Occupation Director of Quality	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	<input type="text"/> 60.00
		Payroll Deduction (\$20, 2 weeks)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 150.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 38
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ed Mowen		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 8613 Highlands Drive		<b>Transaction ID:</b> SA11AI.10594
	City Trussville	State AL	Zip Code 35173
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
	Name of Employer HealthSouth	Occupation Regional Controller	Payroll Deduction (\$15, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sandra Murvin		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 1831 28th Ave South Suite 330		<b>Transaction ID:</b> SA11AI.10596
	City Birmingham	State AL	Zip Code 35209
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
	Name of Employer HealthSouth	Occupation Vice President	Payroll Deduction (\$40, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Martin O'Neil		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
	Mailing Address 11853 104th Lane North		<b>Transaction ID:</b> SA11AI.10656
	City Largo	State FL	Zip Code 33773
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
	Name of Employer Healthsouth Corporation	Occupation Director of Marketing	Payroll Deduction (\$25, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 26 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Patricia Ostaszewski

Mailing Address 54 Bay Way Drive

City State Zip Code  
Brick NJ 08723

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

Name of Employer HealthSouth Occupation VP Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10598

Amount of Each Receipt this Period 75.00

Payroll Deduction (\$25, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Shawn Patzkowsky

Mailing Address 133 Narrows Peak Circle

City State Zip Code  
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation Director of Income Tax Compliance

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10599

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 2401 N Slick Rock

City State Zip Code  
Columbia MO 65202

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.10600

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$20, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **195.00**

**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 27 / 38  
(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)  
Doni Y. Phillips

Mailing Address 5816 Winchester

City State Zip Code  
Texarkana TX 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  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10657

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**B.**

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

Mailing Address 2518 Belmont Terrace #2A

City State Zip Code  
Fredericksburg VA 22401

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

Name of Employer HealhtSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10658

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**C.**

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

Mailing Address 103 History Lane

City State Zip Code  
Summerville SC 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  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10602

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

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

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

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

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

FOR LINE NUMBER: PAGE 28 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Mark J Rice

Mailing Address 182 Jill Loop

City Ruston State LA Zip Code 71270

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10604  
 Amount of Each Receipt this Period 45.00  
 Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 84 Downing Street

City Columbia State SC Zip Code 29209

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 ▼ 832.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10605  
 Amount of Each Receipt this Period 114.00  
 Payroll Deduction (\$30, 2 weeks)

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

Mailing Address 750 Barkman Creek Road

City Hooks State TX Zip Code 75561

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 / 16 / 2009  
**Transaction ID:** SA11AI.10659  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 189.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
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 HealthSouth Corporation      Occupation Regional Director Human Resources

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10660

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Ruskan

Mailing Address 304 Beechwood Drive

City State Zip Code  
Richmond VA 23229

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

Name of Employer HealthSouth      Occupation Healthcare Facility Administrator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10606

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$20, 2 weeks)

**C.** Full Name (Last, First, Middle Initial)  
Jim 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 Healthsouth      Occupation Vice President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10608

Amount of Each Receipt this Period 114.00

Payroll Deduction (\$38, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 204.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Michele M Skripps

Mailing Address 204 Lyttleton Way

City Anderson State SC Zip Code 29621

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10609  
 Amount of Each Receipt this Period 60.00  
 Payroll deduction (\$20, 2 weeks)

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

Mailing Address 3460 Indian Lake Lane

City Pelham State AL Zip Code 35124

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

Name of Employer HealthSouth Corporation Occupation Director of Investigations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10610  
 Amount of Each Receipt this Period 45.00  
 Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 112 Wonderly Drive

City Sarver State PA Zip Code 16055

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

Name of Employer HealthSouth Occupation Regional Controller

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10615  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 135.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Darla Summerville

Mailing Address 219 Piper Street

City State Zip Code  
Lilly PA 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 11 / 16 / 2009  
Transaction ID: SA11AI.10616  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$10, 2 weeks)

**B.** Full Name (Last, First, Middle Initial)  
Dean Taggart

Mailing Address 704 Guardbridge Court

City State Zip Code  
Birmingham AL 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 ▼ 240.00

Date of Receipt 11 / 16 / 2009  
Transaction ID: SA11AI.10617  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$10, 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 HealthSouth Occupation President - Inpatient Division

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2760.00

Date of Receipt 11 / 16 / 2009  
Transaction ID: SA11AI.10618  
Amount of Each Receipt this Period 345.00  
Payroll Deduction (\$115, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 405.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 38  
(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) Curtis H. Traylor		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 3307 Waters Edge		<b>Transaction ID:</b> SA11AI.10663
City Manvel	State TX	Zip Code 77578
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer HealthSouth Corporation	Occupation Director of Pharmacy	Payroll Deduction (\$10, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

**B.**

Full Name (Last, First, Middle Initial) Michael G. Treadway		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 109 West Hoskins Street		<b>Transaction ID:</b> SA11AI.10664
City New Boston	State TX	Zip Code 75570
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Controller	Payroll Deduction (\$15, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

**C.**

Full Name (Last, First, Middle Initial) Sandra Kaye Vollman		Date of Receipt MM / DD / YYYY 11 / 16 / 2009
Mailing Address 2908 Glenstone Circle		<b>Transaction ID:</b> SA11AI.10621
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer HealthSouth	Occupation Senior VP Finance	Payroll Deduction (\$40, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1460.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>195.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 38  
(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)  
Andrew Ward

Mailing Address 1100 27th Street South  
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 16 / 2009

Transaction ID: SA11AI.10622

Amount of Each Receipt this Period 90.00

Payroll Deduction (\$30, 2 weeks)

**B.**

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

Mailing Address 2660 Piedmont Dr

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2009

Transaction ID: SA11AI.10625

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$10, 2 weeks)

**C.**

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3736.82

Date of Receipt 11 / 16 / 2009

Transaction ID: SA11AI.10626

Amount of Each Receipt this Period 532.89

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 652.89

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 38  
(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)  
Linda Masone Wilder

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation Senior VP Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 912.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10627  
 Amount of Each Receipt this Period 114.00  
 Payroll Deduction (38, 2 weeks)

**B.**

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

Mailing Address 8147 Fleets Run Dr

City Memphis State TN Zip Code 38018

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10628  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**C.**

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

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 / 16 / 2009  
**Transaction ID:** SA11AI.10629  
 Amount of Each Receipt this Period 230.76  
 Payroll Deduction (\$76.92, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **374.76**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 38  
(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)  
Chris Winchester

Mailing Address 384 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation Director of Compensation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10631  
 Amount of Each Receipt this Period 75.00  
 Payroll Deduction (\$25, 2 weeks)

**B.**

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

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10632  
 Amount of Each Receipt this Period 75.00  
 Payroll Deduction (\$25, 2 weeks)

**C.**

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

Mailing Address 656 Bluff Park Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Director, Contract Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2009  
**Transaction ID:** SA11AI.10633  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$10, 2 weeks)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 180.00

**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 36 / 38  
(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)  
Daniel B Woloszyn

Mailing Address 937 Angle Tarn

City State Zip Code  
West Dundee IL 60118

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10634

Amount of Each Receipt this Period 45.00

Payroll Deduction (\$15, 2 weeks)

**B.**

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

Mailing Address 7054 North Highfield Dr

City State Zip Code  
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10635

Amount of Each Receipt this Period 450.00

Payroll Deduction (\$150, 2 weeks)

**C.**

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

Mailing Address 628 Springbank Terrace

City State Zip Code  
Birmingham AL 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 ▼ 456.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2009

**Transaction ID:** SA11AI.10636

Amount of Each Receipt this Period 57.00

Payroll Deduction (\$19, 2 weeks)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>552.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7684.65</b>

**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 37 / 38

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

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

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

A.	Full Name (Last, First, Middle Initial) <b>AMERIPAC</b>	<b>Transaction ID:</b> SB23.10675
	Mailing Address 140 COVANT #2	Date of Disbursement 11 / 24 / 2009
	City MANCHESTER State NH Zip Code 03102	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>BECERRA FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.10674
	Mailing Address P.O. Box 261060	Date of Disbursement 11 / 24 / 2009
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name <b>XAVIER BECERRA</b>	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>BOB CORKER FOR SENATE</b>	<b>Transaction ID:</b> SB23.10673
	Mailing Address 832 GEORGIA AVENUE STE 221	Date of Disbursement 11 / 24 / 2009
	City CHATTANOOGA State TN Zip Code 37402	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Debt Reduction	
	Candidate Name <b>ROBERT P JR CORKER</b>	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 38 / 38

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

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF MARY LANDRIEU INC</b> <hr/> Mailing Address <b>607 14TH STREET NW SUITE 800 SUITE 1434</b> <hr/> City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20005</b> <hr/> Purpose of Disbursement <span style="float: right;"><input type="text"/></span> <hr/> Candidate Name <b>MARY L LANDRIEU</b> <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>LA</b> District: <b>00</b>	Transaction ID: <b>SB23.10668</b> Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Amount of Each Disbursement this Period <input type="text"/> <b>2000.00</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>JO BONNER FOR CONGRESS COMMITTEE</b> <hr/> Mailing Address <b>P.O.Box 851232</b> <hr/> City <b>Mobile</b> State <b>AL</b> Zip Code <b>36685</b> <hr/> Purpose of Disbursement <span style="float: right;"><input type="text"/></span> <hr/> Candidate Name <b>JO BONNER</b> <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>AL</b> District: <b>01</b>	Transaction ID: <b>SB23.10666</b> Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Amount of Each Disbursement this Period <input type="text"/> <b>1500.00</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MARSHA BLACKBURN FOR CONGRESS INC.</b> <hr/> Mailing Address <b>PO Box 682185</b> <hr/> City <b>Franklin</b> State <b>TN</b> Zip Code <b>37068</b> <hr/> Purpose of Disbursement <span style="float: right;"><input type="text"/></span> <hr/> Candidate Name <b>MARSHA MRS. BLACKBURN</b> <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>TN</b> District: <b>07</b>	Transaction ID: <b>SB23.10665</b> Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Amount of Each Disbursement this Period <input type="text"/> <b>1500.00</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text"/> <b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> <b>10000.00</b>