

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="23421.35"/>	<input type="text" value="23421.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33129.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7119.72"/>	<input type="text" value="45328.12"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="40249.47"/>	<input type="text" value="68749.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8030.00"/>	<input type="text" value="36530.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="32219.47"/>	<input type="text" value="32219.47"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5472.15	27104.68
(ii) Unitemized	1647.57	15723.44
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7119.72	42828.12
(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)	7119.72	42828.12
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	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7119.72	45328.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7119.72	45328.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	30.00	30.00
(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)).....	30.00	30.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8030.00	36530.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8030.00	36530.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7119.72	42828.12
34. Total Contribution Refunds (from Line 28(d))	30.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7089.72	42798.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Steven Charles Adams
Full Name (Last, First, Middle Initial)
Mailing Address 37 Louanis Drive

City Reading	State MA	Zip Code 01867
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21847

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Steven Charles Adams
Full Name (Last, First, Middle Initial)
Mailing Address 37 Louanis Drive

City Reading	State MA	Zip Code 01867
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.21944

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Steven Charles Adams
Full Name (Last, First, Middle Initial)
Mailing Address 37 Louanis Drive

City Reading	State MA	Zip Code 01867
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22039

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3108 Preserve Rookery Boulevard

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21851

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3108 Preserve Rookery Boulevard

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.21948

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3108 Preserve Rookery Boulevard

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22043

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 8 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. David Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 Central Street
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11AI.21852
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

B. David Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 Central Street
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.21949
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C. David Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 Central Street
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Managed Care Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.22044
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 9 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 8291 Deerbrook Circle

City State Zip Code
 Sarasota FL 34238

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

Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 06 / 05 / 2015
Transaction ID : SA11AI.21854

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 8291 Deerbrook Circle

City State Zip Code
 Sarasota FL 34238

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

Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 06 / 18 / 2015
Transaction ID : SA11AI.21951

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 8291 Deerbrook Circle

City State Zip Code
 Sarasota FL 34238

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

Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 265.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : SA11AI.22046

Amount of Each Receipt this Period
 25.00

Payroll Deduction (\$25, 2 weeks)

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

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

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

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

FOR LINE NUMBER: PAGE 10 OF 48
(check only one)

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

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

A. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

City Frisco	State TX	Zip Code 75034
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21855

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

City Frisco	State TX	Zip Code 75034
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.21952

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 5030 Iroquois Drive

City Frisco	State TX	Zip Code 75034
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22047

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 11 OF 48
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail
City Hockley State TX Zip Code 77447
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11AI.21856
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

B. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail
City Hockley State TX Zip Code 77447
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.21953
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

C. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail
City Hockley State TX Zip Code 77447
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.22048
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11Al.21857

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

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

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

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11Al.21954

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

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

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

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

Name of Employer Healthsouth Corporation	Occupation Regional Operations Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11Al.22049

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	57.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Real Estate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **264.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : SA11Al.21861
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

B. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Real Estate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **288.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : SA11Al.21957
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

C. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Real Estate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **312.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : SA11Al.22052
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Dr. Dexanne B. Clohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2351 River Grand Drive
 City Birmingham State AL Zip Code 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2112.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11AI.21863
 Amount of Each Receipt this Period 192.00
 Payroll Deduction (\$192, 2 weeks)

B. Dr. Dexanne B. Clohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2351 River Grand Drive
 City Birmingham State AL Zip Code 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2304.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.21959
 Amount of Each Receipt this Period 192.00
 Payroll Deduction (\$192, 2 weeks)

C. Dr. Dexanne B. Clohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2351 River Grand Drive
 City Birmingham State AL Zip Code 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.22054
 Amount of Each Receipt this Period 192.00
 Payroll Deduction (\$192, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Kevin R. Conn
Full Name (Last, First, Middle Initial)

Mailing Address 6192 NW 88th Avenue

City Parkland	State FL	Zip Code 33067
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : SA11AI.21865

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 6192 NW 88th Avenue

City Parkland	State FL	Zip Code 33067
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2015

Transaction ID : SA11AI.21961

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Kevin R. Conn
Full Name (Last, First, Middle Initial)

Mailing Address 6192 NW 88th Avenue

City Parkland	State FL	Zip Code 33067
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : SA11AI.22056

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 48
(check only one)

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

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

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

Mailing Address 527 Valley Road

City	State	Zip Code
Birmingham	AL	35206

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

Name of Employer	Occupation
HealthSouth Corporation	Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **913.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : SA11Al.21872

Amount of Each Receipt this Period

83.00

Payroll Deduction (\$83, 2 weeks)

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

Mailing Address 527 Valley Road

City	State	Zip Code
Birmingham	AL	35206

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

Name of Employer	Occupation
HealthSouth Corporation	Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **996.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2015

Transaction ID : SA11Al.21968

Amount of Each Receipt this Period

83.00

Payroll Deduction (\$83, 2 weeks)

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

Mailing Address 527 Valley Road

City	State	Zip Code
Birmingham	AL	35206

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

Name of Employer	Occupation
HealthSouth Corporation	Senior Vice President and Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1079.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : SA11Al.22063

Amount of Each Receipt this Period

83.00

Payroll Deduction (\$83, 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 17 OF 48
(check only one)

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

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

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

Mailing Address 7130 East Saddleback Street
Apt. 56

City State Zip Code
Mesa AZ 85207

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

Name of Employer Occupation
HealthSouth Corporation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
616.00

Date of Receipt
06 / 05 / 2015

Transaction ID : SA11AI.21876

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

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

Mailing Address 7130 East Saddleback Street
Apt. 56

City State Zip Code
Mesa AZ 85207

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

Name of Employer Occupation
HealthSouth Corporation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
672.00

Date of Receipt
06 / 18 / 2015

Transaction ID : SA11AI.21972

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

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

Mailing Address 7130 East Saddleback Street
Apt. 56

City State Zip Code
Mesa AZ 85207

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

Name of Employer Occupation
HealthSouth Corporation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
728.00

Date of Receipt
06 / 26 / 2015

Transaction ID : SA11AI.22067

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 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 18 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Nicholas David Hardin
 Full Name (Last, First, Middle Initial)
 Mailing Address 24014 Clover Trails
 City State Zip Code
 Katy TX 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.21877
 Amount of Each Receipt this Period
 19.00
 Payroll Deduction (\$19, 2 weeks)

B. Nicholas David Hardin
 Full Name (Last, First, Middle Initial)
 Mailing Address 24014 Clover Trails
 City State Zip Code
 Katy TX 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.21973
 Amount of Each Receipt this Period
 19.00
 Payroll Deduction (\$19, 2 weeks)

C. Nicholas David Hardin
 Full Name (Last, First, Middle Initial)
 Mailing Address 24014 Clover Trails
 City State Zip Code
 Katy TX 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.22068
 Amount of Each Receipt this Period
 19.00
 Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. William Bernard House III
Full Name (Last, First, Middle Initial)
Mailing Address 1739 Lake Cyrus Club Drive

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11Al.21883

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

B. William Bernard House III
Full Name (Last, First, Middle Initial)
Mailing Address 1739 Lake Cyrus Club Drive

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11Al.21978

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

C. William Bernard House III
Full Name (Last, First, Middle Initial)
Mailing Address 1739 Lake Cyrus Club Drive

City Hoover	State AL	Zip Code 35244
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11Al.22073

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 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: (check only one)	PAGE 20 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth Corporation	Occupation Public Policy, Legislation & Regulatio
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21884

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth Corporation	Occupation Public Policy, Legislation & Regulatio
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.21979

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth Corporation	Occupation Public Policy, Legislation & Regulatio
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22074

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 516 Upper Trail

City Blythewood State SC Zip Code 29016

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.21885

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 516 Upper Trail

City Blythewood State SC Zip Code 29016

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.21980

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 516 Upper Trail

City Blythewood State SC Zip Code 29016

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.22075

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Barbara A. Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Court
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 06 / 05 / 2015
Transaction ID : SA11AI.21886
 Amount of Each Receipt this Period 40.00
 Payroll Deduction (\$40, 2 weeks)

B. Barbara A. Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Court
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 06 / 18 / 2015
Transaction ID : SA11AI.21981
 Amount of Each Receipt this Period 40.00
 Payroll Deduction (\$40, 2 weeks)

C. Barbara A. Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Court
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : SA11AI.22076
 Amount of Each Receipt this Period 40.00
 Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : **SA11Al.21892**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

B. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : **SA11Al.21987**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

C. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Information Technology Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : **SA11Al.22082**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **638.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : **SA11Al.21894**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **696.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : **SA11Al.21989**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Operations Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **754.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : **SA11Al.22084**

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **174.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 801 Elm Spring Road

City Pittsburgh	State PA	Zip Code 15243
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SA11AI.21896

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City Pittsburgh	State PA	Zip Code 15243
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

Transaction ID : SA11AI.21991

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 801 Elm Spring Road

City Pittsburgh	State PA	Zip Code 15243
--------------------	-------------	-------------------

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 ▼ **456.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2015

Transaction ID : SA11AI.22086

Amount of Each Receipt this Period

12.00

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 26 OF 48
(check only one)

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

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

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

Mailing Address 675 Shades Crest Road

City Hoover	State AL	Zip Code 35226
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Senior Associate General Counsel
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11Al.21897

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 675 Shades Crest Road

City Hoover	State AL	Zip Code 35226
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Senior Associate General Counsel
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11Al.21993

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 675 Shades Crest Road

City Hoover	State AL	Zip Code 35226
----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Senior Associate General Counsel
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11Al.22087

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 4032 Milner Way

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Home Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : **SA11Al.21899**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30, 2 weeks)

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

Mailing Address 4032 Milner Way

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Home Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : **SA11Al.21995**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30, 2 weeks)

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

Mailing Address 4032 Milner Way

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation National Home Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : **SA11Al.22089**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : **SA11AI.21901**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : **SA11AI.21997**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : **SA11AI.22091**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Wanda Morales
 Mailing Address 309 Chapelwood Drive
 City Dothan State AL Zip Code 36303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Quality/Risk Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 05 / 2015
Transaction ID : SA11AI.21905
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Wanda Morales
 Mailing Address 309 Chapelwood Drive
 City Dothan State AL Zip Code 36303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Quality/Risk Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2015
Transaction ID : SA11AI.22001
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Wanda Morales
 Mailing Address 309 Chapelwood Drive
 City Dothan State AL Zip Code 36303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Quality/Risk Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : SA11AI.22095
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : SA11AI.21906

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2015

Transaction ID : SA11AI.22002

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : SA11AI.22096

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 31 OF 48
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Sandra Murvin
Full Name (Last, First, Middle Initial)
Mailing Address 1831 28th Ave South
Suite 330
City Birmingham State AL Zip Code 35209
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Deputy General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11Al.21908
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

B. Sandra Murvin
Full Name (Last, First, Middle Initial)
Mailing Address 1831 28th Ave South
Suite 330
City Birmingham State AL Zip Code 35209
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Deputy General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11Al.22004
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

C. Sandra Murvin
Full Name (Last, First, Middle Initial)
Mailing Address 1831 28th Ave South
Suite 330
City Birmingham State AL Zip Code 35209
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Deputy General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11Al.22098
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address PO Box 2192

City State Zip Code
Brentwood TN 37024

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 ▼
220.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2015
Transaction ID : SA11AI.21880

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address PO Box 2192

City State Zip Code
Brentwood TN 37024

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 ▼
240.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2015
Transaction ID : SA11AI.22005

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Susan Neff
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2192

City State Zip Code
Brentwood TN 37024

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 ▼
260.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2015
Transaction ID : SA11AI.22099

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 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 Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.21909
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

B. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 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 Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.22006
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

C. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 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 Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.22100
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Dawn S. Pearson
Full Name (Last, First, Middle Initial)

Mailing Address 22 Linda Lane

City Egg Harbor Township State NJ Zip Code 08234

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.21910

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Dawn S. Pearson
Full Name (Last, First, Middle Initial)

Mailing Address 22 Linda Lane

City Egg Harbor Township State NJ Zip Code 08234

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.22007

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. Dawn S. Pearson
Full Name (Last, First, Middle Initial)

Mailing Address 22 Linda Lane

City Egg Harbor Township State NJ Zip Code 08234

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

Name of Employer HealthSouth Corporation Occupation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.22101

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : **SA11AI.21913**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **06 / 18 / 2015**
Transaction ID : **SA11AI.22010**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : **SA11AI.22104**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt **06 / 05 / 2015**

Transaction ID : SA11Al.21914

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt **06 / 18 / 2015**

Transaction ID : SA11Al.22011

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1040.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : SA11Al.22105

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 37 OF 48
(check only one)

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

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

A. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)
Mailing Address 1827 Sentry Oak Court
City Orange Park State FL Zip Code 32003
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11AI.21917
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

B. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)
Mailing Address 1827 Sentry Oak Court
City Orange Park State FL Zip Code 32003
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.22015
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

C. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)
Mailing Address 1827 Sentry Oak Court
City Orange Park State FL Zip Code 32003
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.22109
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 204 Lyttleton Way

City Anderson	State SC	Zip Code 29621
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21919

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 204 Lyttleton Way

City Anderson	State SC	Zip Code 29621
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.22017

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 204 Lyttleton Way

City Anderson	State SC	Zip Code 29621
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22111

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 39 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1039 Williams Trace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1265.00

Date of Receipt
 06 / 05 / 2015
Transaction ID : SA11AI.21925

Amount of Each Receipt this Period
 115.00

Payroll Deduction (\$115, 2 weeks)

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

Mailing Address 1039 Williams Trace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1380.00

Date of Receipt
 06 / 18 / 2015
Transaction ID : SA11AI.22023

Amount of Each Receipt this Period
 115.00

Payroll Deduction (\$115, 2 weeks)

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

Mailing Address 1039 Williams Trace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1495.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : SA11AI.22118

Amount of Each Receipt this Period
 115.00

Payroll Deduction (\$115, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 345.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.21928

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.22026

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.22121

Amount of Each Receipt this Period
12.00

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **52.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Andrew 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 ▼ **313.50**

Date of Receipt
06 / 05 / 2015

Transaction ID : SA11AI.21930

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

Full Name (Last, First, Middle Initial)
B. 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 ▼ **342.00**

Date of Receipt
06 / 18 / 2015

Transaction ID : SA11AI.22028

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

Full Name (Last, First, Middle Initial)
C. 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 ▼ **370.50**

Date of Receipt
06 / 26 / 2015

Transaction ID : SA11AI.22124

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **85.50**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. John Whittington
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Watkins Glen Drive
 City Birmingham State AL Zip Code 35216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1953.93

Date of Receipt
 06 / 05 / 2015
Transaction ID : SA11AI.21933
 Amount of Each Receipt this Period 177.63
 Payroll Deduction (\$177.63, 2 weeks)

B. John Whittington
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Watkins Glen Drive
 City Birmingham State AL Zip Code 35216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2131.56

Date of Receipt
 06 / 18 / 2015
Transaction ID : SA11AI.22031
 Amount of Each Receipt this Period 177.63
 Payroll Deduction (\$177.63, 2 weeks)

C. John Whittington
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Watkins Glen Drive
 City Birmingham State AL Zip Code 35216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2309.19

Date of Receipt
 06 / 26 / 2015
Transaction ID : SA11AI.22127
 Amount of Each Receipt this Period 177.63
 Payroll Deduction (\$177.63, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	532.89
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 43 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11AI.21934
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

B. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.22032
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

C. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.22128
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 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 44 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Arthur E Wilson Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5947 South Shades Crest Rd
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **846.12**

Date of Receipt **06 / 05 / 2015**
Transaction ID : SA11AI.21936
 Amount of Each Receipt this Period **76.92**
 Payroll Deduction (\$76.92, 2 weeks)

B. Arthur E Wilson Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5947 South Shades Crest Rd
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **923.04**

Date of Receipt **06 / 18 / 2015**
Transaction ID : SA11AI.22034
 Amount of Each Receipt this Period **76.92**
 Payroll Deduction (\$76.92, 2 weeks)

C. Arthur E Wilson Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5947 South Shades Crest Rd
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **999.96**

Date of Receipt **06 / 26 / 2015**
Transaction ID : SA11AI.22130
 Amount of Each Receipt this Period **76.92**
 Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **230.76**
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 45 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. 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 Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
06 / 05 / 2015
Transaction ID : SA11Al.21938

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

Full Name (Last, First, Middle Initial)
B. 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 Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
06 / 18 / 2015
Transaction ID : SA11Al.22036

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

Full Name (Last, First, Middle Initial)
C. 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 Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : SA11Al.22132

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **75.00**

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 46 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. 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	Occupation
HealthSouth Corporation	Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11AI.21940

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 628 Springbank Terrace

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **456.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.22038

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)
C. 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	Occupation
HealthSouth Corporation	Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11AI.22135

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	5472.15

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

A. KIRK FOR SENATE

Mailing Address P.O. BOX 8

City WINNETKA State IL Zip Code 60093

Purpose of Disbursement

Candidate Name
MARK STEVEN KIRK

Office Sought: House
 Senate
 President
State: IL District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SB23.21842

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. KIRK FOR SENATE

Mailing Address P.O. BOX 8

City WINNETKA State IL Zip Code 60093

Purpose of Disbursement

Candidate Name
MARK STEVEN KIRK

Office Sought: House
 Senate
 President
State: IL District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SB23.21844

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. LOBIONDO FOR CONGRESS

Mailing Address PO BOX 775

City MARMORA State NJ Zip Code 08223

Purpose of Disbursement

Candidate Name
FRANK A. A LOBIONDO

Office Sought: House
 Senate
 President
State: NJ District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2015

Transaction ID : SB23.21846

Amount of Each Disbursement this Period

1000.00

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PORTMAN FOR SENATE COMMITTEE

Mailing Address 9856 ARCHER LANE

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement

Candidate Name
ROB PORTMAN

Office Sought: House
 Senate
 President
State: OH District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : SB23.21845

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2500.00

8000.00