

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		30361.64
(b) Cash on Hand at Beginning of Reporting Period.....	23573.30	
(c) Total Receipts (from Line 19)	9257.48	33229.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32830.78	63590.78
7. Total Disbursements (from Line 31).....	18500.00	49260.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14330.78	14330.78
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

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).....	3994.10	14150.58
(ii) Unitemized	1763.38	15578.56
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5757.48	29729.14
(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)	5757.48	29729.14
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.....	3500.00	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	9257.48	33229.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9257.48	33229.14

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.....	18500.00	49000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	260.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	260.00
29. Other Disbursements	0.00	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)) ..	18500.00	49260.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18500.00	49260.00

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)	5757.48	29729.14
34. Total Contribution Refunds (from Line 28(d))	0.00	260.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5757.48	29469.14
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 33
<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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11AI.16095

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Kenneth J Anthony
Full Name (Last, First, Middle Initial)
Mailing Address 734 10th Street

City Oakmont	State PA	Zip Code 15139
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11AI.16098

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 Director of Managed Care
---	---

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
05	/	31	/	2013

Transaction ID : SA11AI.16101

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 33
	<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. Marcus John Braz
Full Name (Last, First, Middle Initial)

Mailing Address 8291 Deerbrook Circle

City Sarasota State FL Zip Code 34238

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
05 / 31 / 2013

Transaction ID : SA11Al.16103

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 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 ▼ **400.00**

Date of Receipt
05 / 17 / 2013

Transaction ID : SA11Al.15978

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 ▼ **440.00**

Date of Receipt
05 / 31 / 2013

Transaction ID : SA11Al.16105

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
	<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. 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	Occupation Healthcare Facility 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
05	/	31	/	2013

Transaction ID : SA11Al.16106

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

B. Michael L. Bullitt
Full Name (Last, First, Middle Initial)
Mailing Address 3711 Kessler

City Wichita Falls	State TX	Zip Code 76309
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11Al.16108

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation VP Real Estate
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : SA11Al.15984

Amount of Each Receipt this Period
24.00

Payroll Deduction (\$24, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	63.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<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 VP Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **264.00**

Date of Receipt **05 / 31 / 2013**
Transaction ID : SA11Al.16111
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 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 **1920.00**

Date of Receipt **05 / 17 / 2013**
Transaction ID : SA11Al.15987
 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 **2112.00**

Date of Receipt **05 / 31 / 2013**
Transaction ID : SA11Al.16114
 Amount of Each Receipt this Period **192.00**
 Payroll Deduction (\$192, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	408.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
<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. Kevin R. Conn
Full Name (Last, First, Middle Initial)

Mailing Address 10456 N.W. 48th Manor

City Coral Springs State FL Zip Code 33076

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

Name of Employer HealthSouth Corporation Occupation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11Al.16116

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt **05 / 17 / 2013**

Transaction ID : SA11Al.15997

Amount of Each Receipt this Period **83.00**

Payroll Deduction (\$83, 2 weeks)

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

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **913.00**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11Al.16124

Amount of Each Receipt this Period **83.00**

Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	186.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<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 V. Feth
Full Name (Last, First, Middle Initial)

Mailing Address 1930 East Claire Drive

City Phoenix State AZ Zip Code 85022

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11AI.16125

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11AI.16002

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

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

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **616.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11AI.16129

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	132.00
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 33
	<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. Susan Heath

Mailing Address **PO Box 2192**

City **Brentwood** State **TN** Zip Code **37024**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16133

Amount of Each Receipt this Period
200.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address **1739 Lake Cyrus Club Drive**

City **Hoover** State **AL** Zip Code **35244**

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

Name of Employer **HealthSouth** Occupation **Regional Controller**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16008

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

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

Mailing Address **1739 Lake Cyrus Club Drive**

City **Hoover** State **AL** Zip Code **35244**

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

Name of Employer **HealthSouth** Occupation **Regional Controller**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16135

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33
	<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. Justin Hunter			Date of Receipt MM / DD / YYYY 05 / 17 / 2013 Transaction ID : SA11AI.16009
Mailing Address 5221 42nd Street NW			Amount of Each Receipt this Period 400.00 Payroll Deduction (\$40, 2 weeks)
City Washington	State DC	Zip Code 20015	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 400.00
Name of Employer HealthSouth		Occupation VP Government and Regulatory Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Justin Hunter			Date of Receipt MM / DD / YYYY 05 / 31 / 2013 Transaction ID : SA11AI.16136
Mailing Address 5221 42nd Street NW			Amount of Each Receipt this Period 400.00 Payroll Deduction (\$40, 2 weeks)
City Washington	State DC	Zip Code 20015	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 440.00
Name of Employer HealthSouth		Occupation VP Government and Regulatory Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. W. Anthony Jackson			Date of Receipt MM / DD / YYYY 05 / 17 / 2013 Transaction ID : SA11AI.16010
Mailing Address 939 Laurel Meadow Lane			Amount of Each Receipt this Period 25.00 Payroll Deduction (\$25, 2 weeks)
City Fort Mill	State SC	Zip Code 29708	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

Mailing Address 939 Laurel Meadow Lane

City Fort Mill State SC Zip Code 29708

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11AI.16137

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 3908 Herman's Lake Ct

City Florissant State MO Zip Code 63034

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 17 / 2013**

Transaction ID : SA11AI.16011

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50, 2 weeks)

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

Mailing Address 3908 Herman's Lake Ct

City Florissant State MO Zip Code 63034

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11AI.16138

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 33
	<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. Jerry Jasper

Mailing Address 5911 Richmond Road #4207

City Texarkana	State TX	Zip Code 75503
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11Al.16139

Amount of Each Receipt this Period
200.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 808 Parkview Circle

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

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

Name of Employer HealthSouth	Occupation CFO - Inpatient Division
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **580.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : SA11Al.16019

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

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

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

Name of Employer HealthSouth	Occupation CFO - Inpatient Division
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **638.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11Al.16145

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	136.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

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

Mailing Address 1203 Elm Drive

City Alabaster State AL Zip Code 35007

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

Name of Employer Healthsouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16022

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

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

Mailing Address 1203 Elm Drive

City Alabaster State AL Zip Code 35007

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

Name of Employer Healthsouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16148

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 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 Director of General Corp & Securities

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
05 / 31 / 2013

Transaction ID : SA11Al.16149

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 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 17 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 1811 Martin St So

City Pell City State AL Zip Code 35128

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

Name of Employer HealthSouth Occupation Director of Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2013
Transaction ID : SA11Al.16024

Amount of Each Receipt this Period
 250.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 1811 Martin St So

City Pell City State AL Zip Code 35128

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

Name of Employer HealthSouth Occupation Director of Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : SA11Al.16150

Amount of Each Receipt this Period
 25.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 8945 Evening Grove Cr

City Cordova State TN Zip Code 38018

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

Name of Employer HealthSoth Occupation VP, Home Health Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : SA11Al.16151

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 33
<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. Peter M. Mantegazza
Full Name (Last, First, Middle Initial)

Mailing Address 38 Madeline Drive

City Ridgefield State CT Zip Code 06877

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11AI.16028

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 38 Madeline Drive

City Ridgefield State CT Zip Code 06877

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11AI.16154

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 Corpotation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11AI.16030

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 19 OF 33
	<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 Corporation Occupation Chief Tax Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **418.00**

Date of Receipt **05 / 31 / 2013**
Transaction ID : SA11Al.16156
 Amount of Each Receipt this Period **38.00**
 Payroll Deduction (\$38, 2 weeks)

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

Date of Receipt **05 / 31 / 2013**
Transaction ID : SA11Al.16161
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

C. Ed Mowen
 Full Name (Last, First, Middle Initial)
 Mailing Address 8613 Highlands Drive
 City Trussville State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Regional Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt **05 / 17 / 2013**
Transaction ID : SA11Al.16036
 Amount of Each Receipt this Period **80.00**
 Payroll Deduction (\$80, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	138.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ed Mowen
Full Name (Last, First, Middle Initial)

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16162

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 1831 28th Ave South Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16038

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 Occupation Vice President

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
05 / 31 / 2013

Transaction ID : SA11Al.16164

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **160.00**

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 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Patricia Ostaszewski
Full Name (Last, First, Middle Initial)
Mailing Address 54 Bay Way Drive

City Brick	State NJ	Zip Code 08723
---------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation VP Operations
---------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : SA11Al.16040

Amount of Each Receipt this Period
250.00

Payroll Deduction (\$25, 2 weeks)

B. Patricia Ostaszewski
Full Name (Last, First, Middle Initial)
Mailing Address 54 Bay Way Drive

City Brick	State NJ	Zip Code 08723
---------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation VP Operations
---------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11Al.16166

Amount of Each Receipt this Period
250.00

Payroll Deduction (\$25, 2 weeks)

C. Shawn Patzkowsky
Full Name (Last, First, Middle Initial)
Mailing Address 133 Narrows Peak Circle

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

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

Name of Employer HealthSouth	Occupation Director of Income Tax Compliance
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : SA11Al.16167

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 33
	(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. Dawn S. Pearson

Mailing Address 22 Linda Lane

City State Zip Code
Egg Harbor Township NJ 08234

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

Name of Employer Occupation
HealthSouth Corporation Human Resources Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2013
Transaction ID : SA11AI.16168

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer Occupation
HealthSouth Corporation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2013
Transaction ID : SA11AI.16049

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer Occupation
HealthSouth Corporation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2013
Transaction ID : SA11AI.16175

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 33
	<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. Jeffrey Ruskan
Full Name (Last, First, Middle Initial)

Mailing Address 304 Beechwood Drive

City Richmond State VA Zip Code 23229

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16178

Amount of Each Receipt this Period
200.00

Payroll Deduction (\$20, 2 weeks)

B. Linda Anne Savino
Full Name (Last, First, Middle Initial)

Mailing Address 13 Telegraph Hill Rd

City Holmdel State NJ Zip Code 07733

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

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2013

Transaction ID : SA11Al.16213

Amount of Each Receipt this Period
500.00

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

Mailing Address 4285 Lexie Circle

City Trussville State AL Zip Code 35173

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

Name of Employer Healthsouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16057

Amount of Each Receipt this Period
60.00

Payroll Deduction (\$60, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	580.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. James A. Simpson		Date of Receipt MM / DD / YYYY 05 / 31 / 2013 Transaction ID : SA11Al.16183
Mailing Address 4285 Lexie Circle		Amount of Each Receipt this Period 660.00
City Trussville	State AL	Zip Code 35173
FEC ID number of contributing federal political committee. C	Name of Employer Healthsouth	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
		Payroll Deduction (\$60, 2 weeks)

Full Name (Last, First, Middle Initial) B. Mark J Tarr		Date of Receipt MM / DD / YYYY 05 / 17 / 2013 Transaction ID : SA11Al.16064
Mailing Address 1039 Williams Trace		Amount of Each Receipt this Period 115.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth	Occupation President - Inpatient Division
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	
		Payroll Deduction (\$115, 2 weeks)

Full Name (Last, First, Middle Initial) C. Mark J Tarr		Date of Receipt MM / DD / YYYY 05 / 31 / 2013 Transaction ID : SA11Al.16190
Mailing Address 1039 Williams Trace		Amount of Each Receipt this Period 115.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth	Occupation President - Inpatient Division
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1265.00	
		Payroll Deduction (\$115, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 33
	<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. Enrique Alberto Vicens-Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1992
 City Guaynabo State PR Zip Code 00970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administration
 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
 05 / 31 / 2013
Transaction ID : SA11Al.16195
 Amount of Each Receipt this Period 19.00
 Payroll Deduction (\$19, 2 weeks)

B. Andrew Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 27th Street South #1004
 City Birmingham State AL Zip Code 35205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2013
Transaction ID : SA11Al.16070
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30, 2 weeks)

C. Andrew Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 27th Street South #1004
 City Birmingham State AL Zip Code 35205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : SA11Al.16196
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	79.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 33
	<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. John Whittington
Full Name (Last, First, Middle Initial)

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1776.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16073

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 Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1953.93**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16201

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 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 Occupation Senior VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16074

Amount of Each Receipt this Period
70.00

Payroll Deduction (\$70, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **425.26**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. 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 Occupation Senior VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11Al.16202

Amount of Each Receipt this Period **70.00**

Payroll Deduction (\$70, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt **05 / 17 / 2013**

Transaction ID : SA11Al.16076

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **846.12**

Date of Receipt **05 / 31 / 2013**

Transaction ID : SA11Al.16204

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **223.84**

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

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

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

FOR LINE NUMBER: PAGE 28 OF 33
(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. Robert M Wisner

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2013

Transaction ID : SA11Al.16078

Amount of Each Receipt this Period
250.00

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 Occupation SVP Reimbursement

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
05 / 31 / 2013

Transaction ID : SA11Al.16206

Amount of Each Receipt this Period
250.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 628 Springbank Terrace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation VP Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2013

Transaction ID : SA11Al.16208

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	69.00
TOTAL This Period (last page this line number only).....▶	3994.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 33
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. BACHUS FOR CONGRESS COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 59444

City Birmingham	State AL	Zip Code 35259
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00260547

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : SA16.16094

Amount of Each Receipt this Period
1000.00

Voiced check #1356 from 10/11/12

B. FRIENDS OF MAX BAUCUS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 586

City HELENA	State MT	Zip Code 59624
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00328211

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2013

Transaction ID : SA16.16212

Amount of Each Receipt this Period
2500.00

C.
Full Name (Last, First, Middle Initial)
Mailing Address _____

City	State	Zip Code
------	-------	----------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	3500.00

**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. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City State Zip Code
GALLATIN TN 37066

Purpose of Disbursement

Candidate Name
DIANE L MRS. BLACK

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB23.16089**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FREEDOM FUND

Mailing Address 1155 21st Street NW
Suite 300

City State Zip Code
Washington DC 20036

Purpose of Disbursement

Candidate Name
MICHAEL D CRAPO

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB23.16084**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. GEORGIANS FOR ISAKSON

Mailing Address POST OFFICE BOX 250116

City State Zip Code
ATLANTA GA 30325

Purpose of Disbursement

Candidate Name
JOHN HARDY ISAKSON

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB23.16092**

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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. GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement

Candidate Name

S. BRETT HON. GUTHRIE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	3

Transaction ID : **SB23.16085**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement

Candidate Name

JIM GERLACH

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify) ▼

State: PA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	3

Transaction ID : **SB23.16086**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. 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

Disbursement For: 2016
 Primary General Other (specify) ▼

State: IL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	3

Transaction ID : **SB23.16209**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0

**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. MOBROOKSFORCONGRESS.COM

Mailing Address 7610 FOXFIRE DR.

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement

Candidate Name

MO BROOKS

Office Sought: House
 Senate
 President

State: AL District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2013

Transaction ID : SB23.16087

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. OHIO PENNSYLVANIA VICTORY FUND

Mailing Address 600 PENNSYLVANIA AVE SE SUITE 210

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2013

Transaction ID : SB23.16082

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City SUGAR LAND State TX Zip Code 77496

Purpose of Disbursement

Candidate Name

PETER G OLSON

Office Sought: House
 Senate
 President

State: TX District: 22

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2013

Transaction ID : SB23.16093

Amount of Each Disbursement this Period

1000.00

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

4500.00

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. PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code
GREAT BEND KS 67530

Purpose of Disbursement

Candidate Name

PAT ROBERTS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : SB23.16081

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. ROSKAM FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 713

City State Zip Code
WHEATON IL 60187

Purpose of Disbursement

Candidate Name

PETER ROSKAM

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2013

Transaction ID : SB23.16211

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

18500.00
