

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Encompass Health Corporation Political Action Committee

ADDRESS (number and street)

9001 Liberty Parkway

Check if different
than previously
reported. (ACC)

Birmingham

AL

35242

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00414649

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 01 2018

through

M M M / D D D / Y Y Y Y Y Y
08 31 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Fay, Edmund, M., ,

Type or Print Name of Treasurer

Signature of Treasurer

Fay, Edmund, M., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 04 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Encompass Health Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		8722.70
(b) Cash on Hand at Beginning of Reporting Period.....	10350.00	
(c) Total Receipts (from Line 19)	4422.84	38550.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	14772.84	47272.84
7. Total Disbursements (from Line 31).....	0.00	32500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14772.84	14772.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Encompass Health Corporation Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
08 01 2018

To:

M M / D D / Y Y Y Y Y
08 31 2018

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).....

3691.84

20779.80

(ii) Unitemized

731.00

16770.34

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

4422.84

37550.14

(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)

4422.84

37550.14

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.....

0.00

1000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total 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))

4422.84

38550.14

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

4422.84

38550.14

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

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.....	0.00	32500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	0.00	32500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	32500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	4422.84	37550.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4422.84	37550.14
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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

There was an error in the beginning balance of the previous month's report that was corrected. In addition, one payroll deposit was omitted from the original filing.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Adams, Steven, Charles, ,

Mailing Address 37 Louanis Drive

City
Reading

State
MA

Zip Code
01867

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29296

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Armstrong, Justin, A., ,

Mailing Address 2402 Briarhill Court

City
White Oak

State
PA

Zip Code
15131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Health Information Management Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29297

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baird, Andrew, C., ,

Mailing Address 1908 Potomac Avenue
#101

City
Alexandria

State
VA

Zip Code
22301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Government Relations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29298

Amount of Each Receipt this Period

40.00

☐ Memo Item

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: PAGE 8 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bennett, Tony, , ,

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29300

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Berry, David, , ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29301

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bitner, Gretchin, P., ,

Mailing Address 20421 Anchor Circle

City

Huntington Beach

State

CA

Zip Code

92646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Therapy Operations Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29302

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

110.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Braz, Marcus, John, ,

Mailing Address 8291 Deerbrook Circle

City
Sarasota

State
FL

Zip Code
34238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29303

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brewer, Jennifer, , ,

Mailing Address 5030 Iroquois Drive

City
Frisco

State
TX

Zip Code
75034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29304

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Jr., Frank, , ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29305

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

170.00

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)

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Terrence, , ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Operations Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29306

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buck, Phylis, A., ,

Mailing Address PO Box 6939

City
Texarkana

State
TX

Zip Code
75505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29307

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bunner, Blake, R., ,

Mailing Address 4674 N. Silverdale Road

City
Rockport

State
IN

Zip Code
47635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29308

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

108.00

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 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Byrd, Charles, Richard, , III

Mailing Address 3609 Ridgecrest Road

City
Birmingham

State
AL

Zip Code
35223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
National Real Estate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29310

Amount of Each Receipt this Period

48.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Conn, Kevin, R., ,

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 (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29313

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Darby, John, P., ,

Mailing Address 3115 Overhill Road

City
Birmingham

State
AL

Zip Code
35223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29315

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

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

288.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dedecker, Troy, , ,

Mailing Address 5507 Falmouth

City
Fairway

State
KS

Zip Code
66205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29317

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Devaney, Catherine, V., ,

Mailing Address 19 Buckingham Drive

City
Bow

State
NH

Zip Code
03304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29318

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drake, Pamela, O'Bryant, ,

Mailing Address 6165 E. Riverdale St.

City
Mesa

State
AZ

Zip Code
85215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional Marketing Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29319

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 13 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fay, Edmund, M., ,

Mailing Address 527 Valley Road

City
Birmingham

State
AL

Zip Code
35206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29322

Amount of Each Receipt this Period

166.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gray, Jerry, , ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29326

Amount of Each Receipt this Period

112.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hardin, Nicholas, David, ,

Mailing Address 24014 Clover Trails

City
Katy

State
TX

Zip Code
77494

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29331

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

316.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. House, William, Bernard, , III

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Controller

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29335

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hunter, Justin, , ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Public Policy, Legislation & Regulation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29336

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jacobsmeyer, Barbara, A., ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional President

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1632.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29337

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

342.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kiehl, Tiffany, L., ,

Mailing Address 1105 James Creek Circle

City
Raymore

State
MO

Zip Code
64083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29342

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$12, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kindle, Mike, , ,

Mailing Address 828 Aberlady Place

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Information Technology Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29343

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klementz, David, , ,

Mailing Address 808 Parkview Circle

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Operations Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

986.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29346

Amount of Each Receipt this Period

116.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

216.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laffey, Leah, Anne, ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29348

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leasure, Stephen, D., ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Senior Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29350

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leech, Robert, Eugene, ,

Mailing Address 4032 Milner Way

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

National Home Health Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29352

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

140.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loggins, Phillip, E., ,

Mailing Address 5022 McLaughlin Drive

City
Tallahassee

State
FL

Zip Code
32309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional Quality/Risk Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29353

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mantegazza, Peter, M., ,

Mailing Address 38 Madeline Drive

City
Ridgefield

State
CT

Zip Code
06877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29354

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. McCallum, Robert, Warren, , III

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 (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Chief Tax Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

646.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29355

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

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

182.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGrath, Denise, B., ,

Mailing Address 222 River Walk Drive

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29356

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morales, Wanda, , ,

Mailing Address 309 Chapelwood Drive

City

Dothan

State

AL

Zip Code

36303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Quality/Risk Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29359

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mowen, Ed, M., ,

Mailing Address 8613 Highlands Drive

City

Trussville

State

AL

Zip Code

35173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29360

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

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

270.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murvin, Sandra, W., ,

Mailing Address 2858 Canterbury Road

City
Birmingham

State
AL

Zip Code
35223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29362

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ostaszewski, Patricia, , ,

Mailing Address 54 Bay Way

City
Brick

State
NJ

Zip Code
08723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29363

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Poynter, William, W., ,

Mailing Address 1202 Berwick Road

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29365

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

210.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Price, Andrew, L., ,

Mailing Address 72 Nolen Street

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29366

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosene, Robert, J., ,

Mailing Address 9747 West Vandeventor Drive

City
Littleton

State
CO

Zip Code
80128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional Human Resources Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29367

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rosetta, Kevin, R., ,

Mailing Address 1324 Detroit Avenue

City
Nederland

State
TX

Zip Code
77627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional Pharmacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29368

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

168.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schoel, Will, , ,

Mailing Address 2309 Craft Lane

City

Hoover

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Organization Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29371

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shafer, Kathleen, A., ,

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 (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29372

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Skripps, Michele, M., ,

Mailing Address 122 Pine Ridge Drive

City

Belton

State

SC

Zip Code

29627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29373

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

120.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, Walter, C., ,

Mailing Address 1040 Broadway Street

City
Birmingham

State
AL

Zip Code
35209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

State Regulatory Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29376

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taggart, Dean, , ,

Mailing Address 704 Guardbridge Court

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Inspector General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29381

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Terry, Sheila, , ,

Mailing Address 177 Wisteria Dr.

City
Chelsea

State
AL

Zip Code
35043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Regional Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29382

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 23 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Traylor, Curtis, H., ,

Mailing Address 3307 Waters Edge

City
Manvel

State
TX

Zip Code
77578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Pharmacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29383

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$12, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Treadway, Michael, G., ,

Mailing Address 1884 West Holly Trail

City
Hawkins

State
TX

Zip Code
75570

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29384

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tyree, Renee, , ,

Mailing Address 5821 S. Wilson Dr.

City
Chandler

State
AZ

Zip Code
85249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Pharmacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29385

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

124.00

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 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilder, Linda, Masone, ,

Mailing Address 2335 Ridge Trail

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29387

Amount of Each Receipt this Period

140.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Willey, Donn, G., ,

Mailing Address 1932 River Woods Road

City
Hoover

State
AL

Zip Code
35244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
National Compensation Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29388

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Arthur, E., , Jr.

Mailing Address 5947 South Shades Crest Rd

City
Bessemer

State
AL

Zip Code
35022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1307.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2018

Transaction ID : SA11AI.29389

Amount of Each Receipt this Period

153.84

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

331.84

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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, John, Ryan, ,

Mailing Address 1113 Monaghan Drive

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Managed Care Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29390

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisner, Robert, M, ,

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 (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Reimbursement Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29391

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wittig, William, Forrest, ,

Mailing Address 3969 Haddon Circle

City
Hoover

State
AL

Zip Code
35226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29392

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

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

136.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yeager, Russell, , ,

Mailing Address 1348 Saddlecreek Parkway

City
Birmingham

State
AL

Zip Code
35242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 31 / 2018

Transaction ID : SA11AI.29393

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

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

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

80.00

3691.84