

**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="2014"/>		29357.54
(b) Cash on Hand at Beginning of Reporting Period.....	32515.23	
(c) Total Receipts (from Line 19)	7570.48	52058.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	40085.71	81416.14
7. Total Disbursements (from Line 31).....	16000.00	57330.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	24085.71	24085.71
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. 06/2004)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4260.10	20708.78
(ii) Unitemized	810.38	17849.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5070.48	38558.60
(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)	5070.48	38558.60
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.....	2500.00	13500.00
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))..... ▶	7570.48	52058.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7570.48	52058.60

DETAILED SUMMARY PAGE
of Disbursements

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	2300.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2300.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	55000.00
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	30.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	30.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16000.00	57330.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16000.00	57330.43

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)	5070.48	38558.60
34. Total Contribution Refunds (from Line 28(d))	0.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5070.48	38528.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	2300.43
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	2300.43

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19395

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

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

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
07	/	31	/	2014

Transaction ID : SA11Al.19501

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

City Oakmont	State PA	Zip Code 15139
-----------------	-------------	-------------------

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 ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19398

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. Kenneth J Anthony
 Full Name (Last, First, Middle Initial)
 Mailing Address 734 10th Street
 City State Zip Code
 Oakmont PA 15139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.19504
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

B. Tony Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Preserve Rookery Blvd
 City State Zip Code
 Panama City Beach FL 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.19400
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Tony Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 Preserve Rookery Blvd
 City State Zip Code
 Panama City Beach FL 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.19506
 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 8 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. 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 ▼ **280.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19401

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 175 Central Street

City North Reading State MA Zip Code 01864

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

Name of Employer HealthSouth Corporation Occupation Regional Director of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11AI.19507

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

C. 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 ▼ **280.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19402

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 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 9 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. 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 ▼ 300.00

Date of Receipt 07 / 31 / 2014
Transaction ID : SA11AI.19508
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, weeks)

B. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive
City Edwardsville State IL Zip Code 62025
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 25 / 2014
Transaction ID : SA11AI.19403
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20, 2 weeks)

C. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive
City Edwardsville State IL Zip Code 62025
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2014
Transaction ID : SA11AI.19509
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 10 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. 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 ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19404

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

B. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail

City Hockley	State TX	Zip Code 77447
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.19510

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

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

City Birmingham	State AL	Zip Code 35242
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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 ▼
266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19405

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	99.00
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 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. 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 **285.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19511
Amount of Each Receipt this Period **19.00**
Payroll Deduction (\$19, 2 weeks)

B. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068
City Memphis State TN Zip Code 38177
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Controller
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19406
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068
City Memphis State TN Zip Code 38177
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital Controller
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19512
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **49.00**
TOTAL This Period (last page this line number only).....

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

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

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

A. Michael L. Bullitt
Full Name (Last, First, Middle Initial)

Mailing Address 3711 Kessler

City State Zip Code
Wichita Falls TX 76309

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014
Transaction ID : SA11AI.19407

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Michael L. Bullitt
Full Name (Last, First, Middle Initial)

Mailing Address 3711 Kessler

City State Zip Code
Wichita Falls TX 76309

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2014
Transaction ID : SA11AI.19513

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 State Zip Code
Birmingham AL 35223

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

Name of Employer Occupation
HealthSouth Corporation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
MM / DD / YYYY
07 / 25 / 2014
Transaction ID : SA11AI.19410

Amount of Each Receipt this Period
24.00

Payroll Deduction (\$24, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	64.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **360.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19516
 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 **2688.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19413
 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 **2880.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19519
 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 14 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. 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 **280.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19415
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

B. Kevin R. Conn
Full Name (Last, First, Middle Initial)
Mailing Address 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 **300.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19521
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

C. Catherine V. Devaney
Full Name (Last, First, Middle Initial)
Mailing Address 19 Buckingham Drive
City Bow State NH Zip Code 03304
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 **210.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19419
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **55.00**
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 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Catherine V. Devaney
Full Name (Last, First, Middle Initial)

Mailing Address 19 Buckingham Drive

City Bow State NH Zip Code 03304

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 ▼ **225.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19525

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 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 ▼ **1162.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19423

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 ▼ **1245.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19529

Amount of Each Receipt this Period **83.00**

Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **181.00**

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

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

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

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

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

Full Name (Last, First, Middle Initial)
A. Mark K. Freeburn

Mailing Address 551 Windsor Drive

City State Zip Code
 Middletown PA 17057

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

Name of Employer Occupation
 HealthSouth Corporation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 07 / 25 / 2014
Transaction ID : SA11AI.19426

Amount of Each Receipt this Period
 15.00

Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Mark K. Freeburn

Mailing Address 551 Windsor Drive

City State Zip Code
 Middletown PA 17057

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

Name of Employer Occupation
 HealthSouth Corporation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 07 / 31 / 2014
Transaction ID : SA11AI.19532

Amount of Each Receipt this Period
 15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 7130 East Saddleback Street
 Apt. 56

City State Zip Code
 Mesa AZ 85207

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

Name of Employer Occupation
 HealthSouth Corporation SVP Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 784.00

Date of Receipt
 07 / 25 / 2014
Transaction ID : SA11AI.19428

Amount of Each Receipt this Period
 56.00

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 86.00

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 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. 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 ▼ **840.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : SA11AI.19534

Amount of Each Receipt this Period
56.00

Payroll Deduction (\$56, 2 weeks)

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

Mailing Address 24014 Clover Trails

City Katy State TX Zip Code 77494

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 ▼ **266.00**

Date of Receipt
07 / 25 / 2014

Transaction ID : SA11AI.19429

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

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

Mailing Address 24014 Clover Trails

City Katy State TX Zip Code 77494

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 ▼ **285.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : SA11AI.19535

Amount of Each Receipt this Period
19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **94.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.19541

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

B. Justin Hunter
Full Name (Last, First, Middle Initial)
Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth	Occupation VP Government and Regulatory Affairs
---------------------------------	--

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
07	/	25	/	2014

Transaction ID : SA11Al.19436

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

C. Justin Hunter
Full Name (Last, First, Middle Initial)
Mailing Address 5221 42nd Street NW

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

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

Name of Employer HealthSouth	Occupation VP Government and Regulatory Affairs
---------------------------------	--

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
07	/	31	/	2014

Transaction ID : SA11Al.19542

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 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 ▼ **350.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19437

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 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 ▼ **375.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11AI.19543

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 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 ▼ **560.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19438

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

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

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

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

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

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

A. 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 **600.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19544
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

B. Jerry Jasper
 Full Name (Last, First, Middle Initial)
 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 **280.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19439
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

C. Sylvia Kelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Paa-Ko Drive
 City Sandia Park State NM Zip Code 87047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19443
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. Sylvia Kelly
Full Name (Last, First, Middle Initial)
Mailing Address 51 Paa-Ko Drive
City Sandia Park State NM Zip Code 87047
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19548
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Mike Kindle
Full Name (Last, First, Middle Initial)
Mailing Address 828 Aberlady Place
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation VP, Information Technology
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **418.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19445
Amount of Each Receipt this Period **38.00**
Payroll Deduction (\$38, 2 weeks)

C. Mike Kindle
Full Name (Last, First, Middle Initial)
Mailing Address 828 Aberlady Place
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation VP, Information Technology
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **456.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19550
Amount of Each Receipt this Period **38.00**
Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **91.00**
TOTAL This Period (last page this line number only).....

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

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

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

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

Mailing Address 808 Parkview Circle

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **812.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19447

Amount of Each Receipt this Period

58.00

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **870.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.19552

Amount of Each Receipt this Period

58.00

Payroll Deduction (\$58, 2 weeks)

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

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 ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19450

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 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 24 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Stephen D. Leasure
Full Name (Last, First, Middle Initial)
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 **300.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19555
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

B. 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 **420.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19452
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30, 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 **450.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19557
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **80.00**
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 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Phillip E. Loggins
Full Name (Last, First, Middle Initial)

Mailing Address 5022 McLaughlin Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer HealthSouth Corporation Occupation Director of Risk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.19453

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Phillip E. Loggins
Full Name (Last, First, Middle Initial)

Mailing Address 5022 McLaughlin Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer HealthSouth Corporation Occupation Director of Risk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.19558

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. 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 ▼ **532.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.19454

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **68.00**

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 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. 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 ▼ **570.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19559

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **532.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19456

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

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

Mailing Address 3405 Watertown Place

City Vestavia Hills State AL Zip Code 35243

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

Name of Employer HealthSouth Corproation Occupation Chief Tax Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19561

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 27 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 222 River Walk Drive

City Melbourne Beach State FL Zip Code 32951

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19457

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 222 River Walk Drive

City Melbourne Beach State FL Zip Code 32951

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11AI.19562

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

C. 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 ▼ **280.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11AI.19460

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **50.00**

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

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

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

FOR LINE NUMBER: PAGE 28 OF 48
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Wanda Morales

Mailing Address 309 Chapelwood Drive

City Dothan	State AL	Zip Code 36303
----------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation Director of Quality
---------------------------------	-----------------------------------

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
07	/	31	/	2014

Transaction ID : SA11Al.19565

Amount of Each Receipt this Period
200.00

Payroll Deduction (\$20, 2 weeks)

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

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 ▼ **1400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19461

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100, 2 weeks)

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

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 ▼ **1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.19566

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 29 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. 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 ▼
560.00

Date of Receipt
07 / 25 / 2014
Transaction ID : SA11Al.19463

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 1831 28th Ave South
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
07 / 31 / 2014
Transaction ID : SA11Al.19568

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

C. 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 ▼
420.00

Date of Receipt
07 / 25 / 2014
Transaction ID : SA11Al.19464

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 30 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Bay Way Drive
 City 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 ▼ 450.00

Date of Receipt 07 / 31 / 2014
Transaction ID : SA11AI.19569
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30, 2 weeks)

B. Dawn S. Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Linda Lane
 City Egg Harbor Township State NJ Zip Code 08234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 25 / 2014
Transaction ID : SA11AI.19465
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Dawn S. Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Linda Lane
 City Egg Harbor Township State NJ Zip Code 08234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2014
Transaction ID : SA11AI.19570
 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 31 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Gretchin G. Pecher
Full Name (Last, First, Middle Initial)
Mailing Address 9502 Pettswood Dr

City Huntington Beach	State CA	Zip Code 92646
--------------------------	-------------	-------------------

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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11AI.19466

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

B. Gretchin G. Pecher
Full Name (Last, First, Middle Initial)
Mailing Address 9502 Pettswood Dr

City Huntington Beach	State CA	Zip Code 92646
--------------------------	-------------	-------------------

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 ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.19571

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. William W. Poynter
Full Name (Last, First, Middle Initial)
Mailing Address 1379 East Island Place

City Memphis	State TN	Zip Code 38103
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Director of Corporate Recruiting
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11AI.19471

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation Director of Corporate Recruiting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19576

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1120.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19472

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19577

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

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

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

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

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

A. Robert J. Rosene
Full Name (Last, First, Middle Initial)

Mailing Address 16654 West Moreland Street

City Goodyear	State AZ	Zip Code 85338
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional Director Human Resources
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11AI.19473

Amount of Each Receipt this Period

50.00	50.00	50.00	50.00	50.00
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15.00

Payroll Deduction (\$15, 2 weeks)

B. Robert J. Rosene
Full Name (Last, First, Middle Initial)

Mailing Address 16654 West Moreland Street

City Goodyear	State AZ	Zip Code 85338
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional Director Human Resources
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11AI.19578

Amount of Each Receipt this Period

50.00	50.00	50.00	50.00	50.00
-------	-------	-------	-------	-------

15.00

Payroll Deduction (\$15, 2 weeks)

C. Kathleen A. Shafer
Full Name (Last, First, Middle Initial)

Mailing Address 1827 Sentry Oak Court

City Orange Park	State FL	Zip Code 32003
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional Chief Nursing Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11AI.19476

Amount of Each Receipt this Period

50.00	50.00	50.00	50.00	50.00
-------	-------	-------	-------	-------

20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Kathleen A. Shafer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1827 Sentry Oak Court
 City Orange Park State FL Zip Code 32003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19581
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

B. Michele M Skripps
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 Lyttleton Way
 City Anderson State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **280.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11AI.19478
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

C. Michele M Skripps
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 Lyttleton Way
 City Anderson State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11AI.19583
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

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

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

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

FOR LINE NUMBER: PAGE 35 OF 48
(check only one)

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

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

A. Walter Smith
Full Name (Last, First, Middle Initial)
Mailing Address 728 Ridge Way Circle

City Birmingham	State AL	Zip Code 35226
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Director of Development
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19480

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Walter Smith
Full Name (Last, First, Middle Initial)
Mailing Address 728 Ridge Way Circle

City Birmingham	State AL	Zip Code 35226
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Director of Development
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SA11Al.19585

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Dean Taggart
Full Name (Last, First, Middle Initial)
Mailing Address 704 Guardbridge Court

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

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

Name of Employer HealthSouth Corporation	Occupation VP Internal Audit
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SA11Al.19483

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. Dean Taggart
Full Name (Last, First, Middle Initial)
Mailing Address 704 Guardbridge Court
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation VP Internal Audit
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19588
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Mark J Tarr
Full Name (Last, First, Middle Initial)
Mailing Address 1039 Williams Trace
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Occupation President - Inpatient Division
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1610.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19484
Amount of Each Receipt this Period **115.00**
Payroll Deduction (\$115, 2 weeks)

C. Mark J Tarr
Full Name (Last, First, Middle Initial)
Mailing Address 1039 Williams Trace
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Occupation President - Inpatient Division
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1725.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19589
Amount of Each Receipt this Period **115.00**
Payroll Deduction (\$115, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **245.00**
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 37 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19485
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : SA11Al.19590
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Curtis H. Traylor
Full Name (Last, First, Middle Initial)
Mailing Address 3307 Waters Edge
City Manvel State TX Zip Code 77578
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **280.00**

Date of Receipt **07 / 25 / 2014**
Transaction ID : SA11Al.19487
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **50.00**
TOTAL This Period (last page this line number only).....

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

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

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

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.19592

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 109 West Hoskins Street

City New Boston State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.19488

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 109 West Hoskins Street

City New Boston State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.19593

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 39 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. 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 ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.19489
 Amount of Each Receipt this Period 19.00
 Payroll Deduction (\$19, 2 weeks)

B. 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.19594
 Amount of Each Receipt this Period 19.00
 Payroll Deduction (\$19, 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 ▼ 399.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : SA11AI.19490
 Amount of Each Receipt this Period 28.50
 Payroll Deduction (\$28.50, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	66.50
TOTAL This Period (last page this line number only).....▶	

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

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

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

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

Mailing Address 1100 27th Street South
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.50

Date of Receipt
07 / 31 / 2014
Transaction ID : SA11Al.19595

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2486.82

Date of Receipt
07 / 25 / 2014
Transaction ID : SA11Al.19493

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2664.45

Date of Receipt
07 / 31 / 2014
Transaction ID : SA11Al.19598

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 383.76

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

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

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

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

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 ▼ 980.00

Date of Receipt 07 / 25 / 2014
Transaction ID : SA11Al.19494
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

B. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Senior VP Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 31 / 2014
Transaction ID : SA11Al.19599
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

C. Donn G. Willey
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 Riverchase Trails
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Director of Compensation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 25 / 2014
Transaction ID : SA11Al.19495
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 42 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Donn G. Willey
Full Name (Last, First, Middle Initial)

Mailing Address 123 Riverchase Trails

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation National Director of Compensation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19600

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 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 ▼ **1076.88**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19496

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 ▼ **1153.80**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19601

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **168.84**

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: (check only one)	PAGE 43 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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 ▼ **350.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19498

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

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 ▼ **375.00**

Date of Receipt **07 / 31 / 2014**

Transaction ID : SA11Al.19603

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 656 Bluff Park Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Director, Contract Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **07 / 25 / 2014**

Transaction ID : SA11Al.19499

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 656 Bluff Park Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Director, Contract Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11Al.19604

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

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 ▼ **532.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11Al.19500

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

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

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 ▼ **570.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11Al.19605

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	91.00
TOTAL This Period (last page this line number only).....▶	4260.10

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

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

FOR LINE NUMBER: PAGE 45 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.
 Mailing Address P.O. BOX 11091
 City State Zip Code
 CHATTANOOGA TN 37401
 FEC ID number of contributing federal political committee. **C** C00461822
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA16.19394
 Amount of Each Receipt this Period
 2500.00
 Void Check #1446 from 06/23/14

Full Name (Last, First, Middle Initial)
B.
 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 / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.
 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 / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

**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. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.

Mailing Address P.O. BOX 11091

City State Zip Code
CHATTANOOGA TN 37401

Purpose of Disbursement
Replacement for Check #1446 from 06/23/14

Candidate Name
CHARLES J FLEISCHMANN

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2014

Transaction ID : **SB23.19390**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 245

City State Zip Code
WASHINGTON DC 20004

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
07		28		2014

Transaction ID : **SB23.19393**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SAM JOHNSON

Mailing Address P.O. Box 860096

City State Zip Code
Plano TX 75086

Purpose of Disbursement

Candidate Name
SAMUEL R HON. JOHNSON

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TX District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2014

Transaction ID : **SB23.19392**

Amount of Each Disbursement this Period

1000.00

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

8500.00

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. 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	7		2	8		2	0	1	4

Transaction ID : SB23.19391

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 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	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	4

Transaction ID : SB23.19389

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. SHAHEEN FOR SENATE

Mailing Address 105 N STATE STREET

City CONCORD State NH Zip Code 03301

Purpose of Disbursement

Candidate Name

JEANNE SHAHEEN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	4

Transaction ID : SB23.19387

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

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

5	5	0	0	0	0	0	0	0	0

5	5	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. TEAM GRAHAM INC

Mailing Address PO BOX 1801

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement

Candidate Name
LINDSEY OLIN GRAHAM

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: SC District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2014

Transaction ID : SB23.19388

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

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

--

C.

Full Name (Last, First, Middle Initial)

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)..... ▶

2000.00

16000.00
