HEALTHSOUTH
Corporation

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

NOV 22 11 52 AM '94

November 14, 1994

Federal Election Commission
999 East Street, N.W.
Washington, D.C. 20463

Dear Sirs:

Re: HEALTHSOUTH Rehabilitation Corporation
Political Action Committee
FEC Identification Number C-00257048
October 15 Quarterly Report

Enclosed, please find the FEC Form 3X, Report of Receipts and Disbursements, for the above-referenced committee for the quarter ended September 30, 1994. This report is being filed late with the Federal Election Commission for the following reason.

All of the receipts of the committee are received in the form of biweekly payroll deductions. All of the information regarding these payroll deductions are accumulated by ADP, the company that provides payroll services to HEALTHSOUTH Rehabilitation Corporation. The reports for these payroll deductions for the period ending September 30, 1994 were late in arriving at our offices. In addition, these reports had numerous errors in them, and as a result, it took several weeks to get accurate reports in order to prepare the FEC Form 3X for the above committee.

Measures have been taken in order to assure that we get accurate reports in the future on a timely basis so that the FEC Form 3X's are timely prepared and filed.

If you have any questions or need any additional information, please contact me at (205) 967-7116.

Sincerely,

Loree J. Skelton

Loree J. Skelton
Vice President and Attorney
Corporate Development

LJS/mm

Enclosure

9 4 0 3 9 4 4 1 7 0 6

Two Perimeter Park South • Birmingham, AL 35243 • (205) 967-7116

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
HEALTHSOUTH Rehabilitation Corporation
Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
Two Perimeter Park South, 224W

CITY, STATE and ZIP CODE
Birmingham, Alabama 35243

NOV 22 11 52 AM '94

2. FEC IDENTIFICATION NUMBER
C-00257048

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☒ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period July 1, 1994 through September 30, 1994		
6. (a) Cash on Hand January 1, 19 94		$ 27,585.82
(b) Cash on Hand at Beginning of Reporting Period	$ 19,789.63	
(c) Total Receipts (from Line 19)	$ 12,190.40	$ 26,644.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 31,980.03	$ 54,230.03
7. Total Disbursements (from Line 30)	$ 3,500.00	$ 25,750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 28,480.03	$ 28,480.03
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	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer Assisant Treasurer
Anthony J. Tanner

Signature of Treasurer Assistant Treasurer

Date 11/11/94

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

FEC FORM 3X
(revised 9/93)

PE4AN12

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE HEALTHSOUTH Rehabilitation Corporation Political Action Committee

REPORT COVERING PERIOD FROM 7/1/94 TO 9/30/94

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3,990.00	7,145.00	11(a)(i)
ii. Unitemized	8,089.25	19,101.00	11(a)(ii)
iii. Total (add i and ii) ➤	12,079.25	26,246.00	11(a)(i)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	12,079.25	26,246.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	111.15	398.21	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	12,190.40	26,644.21	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	12,190.40	26,644.21	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,500.00	4,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	2,000.00	21,750.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,500.00	25,750.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3,500.00	25,750.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	12,079.25	26,246.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	12,079.25	26,246.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals

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 Rehabilitation Corporation Political Action Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Aaron Beam, Jr. Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation Exec. VP & CFO Aggregate Year-to-Date $ 300.00	Payroll Deduction	$105.00 ($ 15 Biweekly)
B. James P. Bennett Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation President & COO Aggregate Year-to-Date $ 1,325.00	Payroll Deduction	$700.00 ($100 Biweekly)
C. Richard E. Botts Two Perimeter Park South, 224 W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation Vice President Aggregate Year-to-Date $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
D. P. Daryl Brown Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation President & COO Aggregate Year-to-Date $ 260.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
E. Thomas W. Carman Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation Exec. Vice President Aggregate Year-to-Date $ 300.00	Payroll Deduction	$105.00 ($ 15 Biweekly)
F. Jack F. Chamblee, Jr. Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation Vice President Aggregate Year-to-Date $ 200.00	Payroll Deduciton	$70.00 ($ 10 Biweekly)
G. Hannibal Crumpler Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HEALTHSOUTH Rehabilitation Corporation Vice President & Controller Aggregate Year-to-Date $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)

SUBTOTAL of Receipts This Page (optional)	$1,190.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 4

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals

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NAME OF COMMITTEE (In Full)

HEALTHSOUTH Rehabilitation Corporation Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Drew Demaray Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President & Attorney Aggregate Year-to-Date > $ 700.00	Payroll Deduction	$245.00 ($ 35 Biweekly)
B. Henry T. Duke Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 300.00	Payroll Deduction	$105.00 ($ 15 Biweekly)
C. Patrick Foster Two Perimeter Park South, 224 W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$140.00 ($ 20 Biweekly)
D. Jack H. Hawkins Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
E. Larry R. House Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH International, Inc. Occupation: President Aggregate Year-to-Date > $ 630.00	Payroll Deduction	$175.00 ($35 Biweekly Thru 9/2/94)
F. Michael D. Martin Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Sr. VP & Treasurer Aggregate Year-to-Date > $ 300.00	Payroll Deduciton	$105.00 ($ 15 Biweekly)
G. Stuart Murphy Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)

SUBTOTAL of Receipts This Page (optional) $910.00

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

FE-AR12

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals

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NAME OF COMMITTEE (In Full)

HEALTHSOUTH Rehabilitation Corporation Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. W. Donald Myers Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
B. Sheila Owens Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
C. William T. Owens Two Perimeter Park South, 224 W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Sr. VP & Controller Aggregate Year-to-Date > $ 600.00	Payroll Deduction	$210.00 ($ 30 Biweekly)
D. Daniel Riviere Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
E. Thomas Rogan Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 700.00	Payroll Deduction	$245.00 ($ 35 Biweekly)
F. Teresa Rubio Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Asst. Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduciton	$70.00 ($ 10 Biweekly)
G. Richard M. Scrushy Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: President & CEO Aggregate Year-to-Date > $ 500.00	Payroll Deduction	$175.00 ($ 25 Biweekly)

SUBTOTAL of Receipts This Page (optional) $910.00

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

FE-ANT-01

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals

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NAME OF COMMITTEE (In Full)

HEALTHSOUTH Rehabilitation Corporation Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Eugene Smith Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Sr. Vice President Aggregate Year-to-Date > $ 400.00	Payroll Deduction	$140.00 ($ 20 Biweekly)
B. Charles D. Stevenson Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Asst. Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
C. Anthony J. Tanner Two Perimeter Park South, 224 W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Exec. VP & Secretary Aggregate Year-to-Date > $ 1000.00	Payroll Deduction	$350.00 ($ 50 Biweekly)
D. Rob Thomson Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 200.00	Payroll Deduction	$70.00 ($ 10 Biweekly)
E. James T. Waggoner, Jr. Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 400.00	Payroll Deduction	$140.00 ($ 20 Biweekly)
F. Michael Waldheim Two Perimeter Park South, 224W Birmingham, Alabama 35243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Vice President Aggregate Year-to-Date > $ 300.00	Payroll Deduciton	$105.00 ($ 15 Biweekly)
G. Jeffrey Vosel 2201 Capers Avenue Nashville, Tennessee 37212 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: HEALTHSOUTH Rehabilitation Corporation Occupation: Director of Operations Aggregate Year-to-Date > $ 300.00	Payroll Deduction	$105.00 ($ 15 Biweekly)

SUBTOTAL of Receipts This Page (optional) $980.00

TOTAL This Period (last page this line number only) $3,990.00

FE3AH-01

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Contributions to Federal Candidates

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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 Rehabilitation Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Talent for Congress 1031 Executive Parkway, Suite 100 St. Louis, Missouri 63141	James Talent, House Candidate Disbursement for: [x] Primary [ ] General [ ] Other (specify)	7/27/94	$ 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Smathers for COngress Committee 15537 Norge Court Bowie, Maryland 20716	John Smathers, House Candidate Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/12/94	$ 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$ 1, 500.00
TOTAL This Period (last page this line number only)	$ 1,500.00

FE5A/101

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Other Disbursements

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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 Rehabilitation Corporation Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Tommy Carter Campaign 11 South Union Street The State House - Room 519-C Montgomery, Alabama 36130	Nonfederal Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/94	$ 500.00
B. Tom Ridge for Governor Post Office Box 11667 Harrisburg, Pennsylvania 17108-9965	Nonfederal Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/94	$ 1,000.00
C. Bill Nelson Campaign 1499 Harbor City Boulevard, Suite 303 Melbourne, Florida 32901	Nonfederal Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/13/94	$ 500.00
D.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	$ 2,000.00
TOTAL This Period (last page this line number only)	$ 2,000.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 11-16-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

YMN
PREPARER

11-22-94
DATE PREPARED

FEC FORM 70-2 (12/92)