

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

Office Use Only

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

12FE4M5

HealthSouth Corporation Political Action Committee

ADDRESS (number and street)

3660 Grandview Parkway, Suite 200

Check if different  
than previously  
reported. (ACC)

Birmingham

AL

35243

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00414649

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

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

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2017

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

Fay, Edmund, M., ,

Type or Print Name of Treasurer

Signature of Treasurer

Fay, Edmund, M., ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 07 2017

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2017</span>		15528.58
(b) Cash on Hand at Beginning of Reporting Period.....	15081.33	
(c) Total Receipts (from Line 19) .....	9436.33	41685.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	24517.66	57214.12
7. Total Disbursements (from Line 31).....	0.00	32696.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	24517.66	24517.66
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	1	7		

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).....	6955.76	26394.04
(ii) Unitemized .....	2480.57	15291.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9436.33	41685.54
(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) .....	9436.33	41685.54
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
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)) .....	9436.33	41685.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9436.33	41685.54

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	30000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	805.00
(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	805.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1891.46
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	32696.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	32696.46

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9436.33	41685.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	805.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9436.33	40880.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 45  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Adams, Steven, Charles, ,**

Mailing Address 37 Louanis Drive

City  
Reading

State  
MA

Zip Code  
01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27189**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Adams, Steven, Charles, ,**

Mailing Address 37 Louanis Drive

City  
Reading

State  
MA

Zip Code  
01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27288**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Adams, Steven, Charles, ,**

Mailing Address 37 Louanis Drive

City  
Reading

State  
MA

Zip Code  
01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27380**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 7 OF 45  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Alwine, Steven, L., ,**

Mailing Address 635 Marlow Drive

City  
York

State  
PA

Zip Code  
17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27190**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Payroll Deduction (\$10, 2 weeks)

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

**B. Alwine, Steven, L., ,**

Mailing Address 635 Marlow Drive

City  
York

State  
PA

Zip Code  
17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27289**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Payroll Deduction (\$10, 2 weeks)

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

**C. Alwine, Steven, L., ,**

Mailing Address 635 Marlow Drive

City  
York

State  
PA

Zip Code  
17402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27381**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Payroll Deduction (\$10, 2 weeks)

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

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

30.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

**HealthSouth Corporation Political Action Committee**

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

**A. Bennett, Tony, , ,**

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 06 / 2017

**Transaction ID : SA11AI.27192**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Bennett, Tony, , ,**

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

07 / 21 / 2017

**Transaction ID : SA11AI.27294**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Bennett, Tony, , ,**

Mailing Address 3108 Preserve Rookery Boulevard

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 27 / 2017

**Transaction ID : SA11AI.27385**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

60.00



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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Berry, David, , ,**

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27193**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Berry, David, , ,**

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27295**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Berry, David, , ,**

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Regional Managed Care Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27386**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

60.00

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 10 OF 45

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

**HealthSouth Corporation Political Action Committee**

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

**A. Bitner, Gretchin, P., ,**

Mailing Address 20421 Anchor Circle

City  
Huntington Beach

State  
CA

Zip Code  
92646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Therapy Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27387

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Braz, Marcus, John, ,**

Mailing Address 8291 Deerbrook Circle

City  
Sarasota

State  
FL

Zip Code  
34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27259

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**C. Braz, Marcus, John, ,**

Mailing Address 8291 Deerbrook Circle

City  
Sarasota

State  
FL

Zip Code  
34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27297

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

65.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 45

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

**A. Braz, Marcus, John, ,**

Mailing Address 8291 Deerbrook Circle

City  
Sarasota

State  
FL

Zip Code  
34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27451**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**B. Brewer, Jennifer, , ,**

Mailing Address 5030 Iroquois Drive

City  
Frisco

State  
TX

Zip Code  
75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27260**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Brewer, Jennifer, , ,**

Mailing Address 5030 Iroquois Drive

City  
Frisco

State  
TX

Zip Code  
75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27298**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

65.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Brewer, Jennifer, , ,**

Mailing Address 5030 Iroquois Drive

City  
Frisco

State  
TX

Zip Code  
75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27452**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Brown, Jr., Frank, , ,**

Mailing Address 24507 Old Windmill Trail

City  
Hockley

State  
TX

Zip Code  
77447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27195**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**C. Brown, Jr., Frank, , ,**

Mailing Address 24507 Old Windmill Trail

City  
Hockley

State  
TX

Zip Code  
77447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27299**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

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

100.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Brown, Jr., Frank, , ,**

Mailing Address 24507 Old Windmill Trail

City  
Hockley

State  
TX

Zip Code  
77447

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27388**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**B. Brown, Terrence, , ,**

Mailing Address 5217 Meadow Garden Lane

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Healthsouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27196**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

**C. Brown, Terrence, , ,**

Mailing Address 5217 Meadow Garden Lane

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Healthsouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27300**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

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

78.00

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

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

**HealthSouth Corporation Political Action Committee**

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

A. Brown, Terrence, , ,

Mailing Address 5217 Meadow Garden Lane

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Healthsouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27389

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

B. Buck, Phylis, A., ,

Mailing Address PO Box 6939

City  
Texarkana

State  
TX

Zip Code  
75505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27453

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

C. Byrd, Charles, Richard, , III

Mailing Address 3609 Ridgcrest Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Real Estate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27198

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

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

58.00

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

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Byrd, Charles, Richard, , III**

Mailing Address 3609 Ridgcrest Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Real Estate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27303**

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

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

**B. Byrd, Charles, Richard, , III**

Mailing Address 3609 Ridgcrest Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Real Estate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27390**

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction (\$24, 2 weeks)

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

**C. Conn, Kevin, R., ,**

Mailing Address 6192 NW 88th Avenue

City  
Parkland

State  
FL

Zip Code  
33067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27199**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

68.00



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

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

**HealthSouth Corporation Political Action Committee**

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

A. Conn, Kevin, R., ,

Mailing Address 6192 NW 88th Avenue

City  
Parkland

State  
FL

Zip Code  
33067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27306

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

B. Conn, Kevin, R., ,

Mailing Address 6192 NW 88th Avenue

City  
Parkland

State  
FL

Zip Code  
33067

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Operations Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27391

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

C. Corey, Robin, Jo, ,

Mailing Address 5607 Lucas Street

City  
Fredericksburg

State  
VA

Zip Code  
22407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Therapy Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27485

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

290.00

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



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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Devaney, Catherine, V., ,**

Mailing Address 19 Buckingham Drive

City  
Bow

State  
NH

Zip Code  
03304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27395**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Duck, Julia, Lawrence, ,**

Mailing Address 2026 Kirkman Drive

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Financial Operations Senior Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27488**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Fay, Edmund, M., ,**

Mailing Address 527 Valley Road

City

Birmingham

State

AL

Zip Code

35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

996.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11Al.27206**

Amount of Each Receipt this Period

83.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

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

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

598.00

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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

A. Fay, Edmund, M., ,

Mailing Address 527 Valley Road

City  
Birmingham

State  
AL

Zip Code  
35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1079.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27313

Amount of Each Receipt this Period

83.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

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

B. Fay, Edmund, M., ,

Mailing Address 527 Valley Road

City  
Birmingham

State  
AL

Zip Code  
35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1162.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27398

Amount of Each Receipt this Period

83.00

☐ Memo Item

Payroll Deduction (\$83, 2 weeks)

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

C. Freeburn, Mark, K., ,

Mailing Address 551 Windsor Drive

City  
Middletown

State  
PA

Zip Code  
17057

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27400

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 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 19 OF 45

(check only one)

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

**HealthSouth Corporation Political Action Committee**

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

A. Gray, Jerry, , ,

Mailing Address 7130 East Saddleback Street  
 Apt. 56

City  
 Mesa

State  
 AZ

Zip Code  
 85207

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 HealthSouth Corporation

Occupation (for Individual)  
 Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 06 / 2017

Transaction ID : SA11AI.27209

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

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

B. Gray, Jerry, , ,

Mailing Address 7130 East Saddleback Street  
 Apt. 56

City  
 Mesa

State  
 AZ

Zip Code  
 85207

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 HealthSouth Corporation

Occupation (for Individual)  
 Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2017

Transaction ID : SA11AI.27318

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

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

C. Gray, Jerry, , ,

Mailing Address 7130 East Saddleback Street  
 Apt. 56

City  
 Mesa

State  
 AZ

Zip Code  
 85207

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 HealthSouth Corporation

Occupation (for Individual)  
 Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

784.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2017

Transaction ID : SA11AI.27401

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction (\$56, 2 weeks)

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

168.00

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

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

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Gray, Jerry, , ,**

Mailing Address 7130 East Saddleback Street  
Apt. 56

City  
Mesa

State  
AZ

Zip Code  
85207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27489**

Amount of Each Receipt this Period

1250.00

☐ Memo Item

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

**B. Hardin, Nicholas, David, ,**

Mailing Address 24014 Clover Trails

City  
Katy

State  
TX

Zip Code  
77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27212**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

**C. Hardin, Nicholas, David, ,**

Mailing Address 24014 Clover Trails

City  
Katy

State  
TX

Zip Code  
77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27321**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

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

1288.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Hardin, Nicholas, David, ,**

Mailing Address 24014 Clover Trails

City  
Katy

State  
TX

Zip Code  
77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27404**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

**B. House, William, Bernard, , III**

Mailing Address 1739 Lake Cyrus Club Drive

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27214**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

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

**C. House, William, Bernard, , III**

Mailing Address 1739 Lake Cyrus Club Drive

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27325**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

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

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

89.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. House, William, Bernard, , III**

Mailing Address 1739 Lake Cyrus Club Drive

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27406**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

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

**B. Hunter, Justin, , ,**

Mailing Address 5221 42nd Street NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Public Policy, Legislation & Regulator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27215**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**C. Hunter, Justin, , ,**

Mailing Address 5221 42nd Street NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Public Policy, Legislation & Regulator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27326**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

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

115.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Hunter, Justin, , ,**

Mailing Address 5221 42nd Street NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Public Policy, Legislation & Regulation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27407

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**B. Jacobsmeyer, Barbara, A., ,**

Mailing Address 3908 Herman's Lake Court

City  
Florissant

State  
MO

Zip Code  
63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27216

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

**C. Jacobsmeyer, Barbara, A., ,**

Mailing Address 3908 Herman's Lake Court

City  
Florissant

State  
MO

Zip Code  
63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

632.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27327

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

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

232.00



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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Jacobsmeyer, Barbara, A., ,**

Mailing Address 3908 Herman's Lake Court

City  
Florissant

State  
MO

Zip Code  
63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27408**

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction (\$96, 2 weeks)

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

**B. Kindle, Mike, , ,**

Mailing Address 828 Aberlady Place

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Information Technology Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27218**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**C. Kindle, Mike, , ,**

Mailing Address 828 Aberlady Place

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Information Technology Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27331**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

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

172.00



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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Kindle, Mike, , ,**

Mailing Address 828 Aberlady Place

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Information Technology Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

MM / DD / YYYY  
07 / 27 / 2017

**Transaction ID : SA11AI.27410**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**B. Klementz, David, , ,**

Mailing Address 808 Parkview Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Operations Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

MM / DD / YYYY  
07 / 06 / 2017

**Transaction ID : SA11AI.27220**

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

**C. Klementz, David, , ,**

Mailing Address 808 Parkview Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Operations Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

754.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2017

**Transaction ID : SA11AI.27333**

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

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

154.00

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Klementz, David, , ,**

Mailing Address 808 Parkview Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Operations Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27412**

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction (\$58, 2 weeks)

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

**B. Leech, Robert, Eugene, ,**

Mailing Address 4032 Milner Way

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Home Health Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27224**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**C. Leech, Robert, Eugene, ,**

Mailing Address 4032 Milner Way

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Home Health Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27338**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

118.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Leech, Robert, Eugene, ,**

Mailing Address 4032 Milner Way

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Home Health Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27416**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**B. Loggins, Phillip, E., ,**

Mailing Address 5022 McLaughlin Drive

City  
Tallahassee

State  
FL

Zip Code  
32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27417**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Martin, Deanna, , ,**

Mailing Address 5172 Old Shelby Road

City  
Hickory

State  
NC

Zip Code  
28602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27492**

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

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

445.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. McCallum, Robert, Warren, , III**

Mailing Address 3405 Watertown Place

City  
Vestavia Hills

State  
AL

Zip Code  
35243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corproation

Occupation (for Individual)  
Chief Tax Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27226**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**B. McCallum, Robert, Warren, , III**

Mailing Address 3405 Watertown Place

City  
Vestavia Hills

State  
AL

Zip Code  
35243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corproation

Occupation (for Individual)  
Chief Tax Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27340**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**c. McCallum, Robert, Warren, , III**

Mailing Address 3405 Watertown Place

City  
Vestavia Hills

State  
AL

Zip Code  
35243

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corproation

Occupation (for Individual)  
Chief Tax Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27418**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

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

114.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. McGrath, Denise, B., ,**

Mailing Address 222 River Walk Drive

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
07 / 27 / 2017

Transaction ID : SA11AI.27464

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Morales, Wanda, , ,**

Mailing Address 309 Chapelwood Drive

City

Dothan

State

AL

Zip Code

36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Quality/Risk Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
07 / 06 / 2017

Transaction ID : SA11AI.27229

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Morales, Wanda, , ,**

Mailing Address 309 Chapelwood Drive

City

Dothan

State

AL

Zip Code

36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Quality/Risk Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2017

Transaction ID : SA11AI.27344

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

55.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 30 OF 45  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Morales, Wanda, , ,**

Mailing Address 309 Chapelwood Drive

City  
Dothan

State  
AL

Zip Code  
36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Quality/Risk Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27421**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Mowen, Ed, M., ,**

Mailing Address 8613 Highlands Drive

City  
Trussville

State  
AL

Zip Code  
35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27230**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

**C. Mowen, Ed, M., ,**

Mailing Address 8613 Highlands Drive

City  
Trussville

State  
AL

Zip Code  
35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27345**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

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

220.00

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

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Mowen, Ed, M., ,**

Mailing Address 8613 Highlands Drive

City  
Trussville

State  
AL

Zip Code  
35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27422**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction (\$100, 2 weeks)

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

**B. Murvin, Sandra, W., ,**

Mailing Address 2858 Canterbury Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11Al.27232**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

**C. Murvin, Sandra, W., ,**

Mailing Address 2858 Canterbury Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11Al.27347**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

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

180.00



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

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

FOR LINE NUMBER: PAGE 32 OF 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

A. **Murvin, Sandra, W., ,**

Mailing Address 2858 Canterbury Road

City  
Birmingham

State  
AL

Zip Code  
35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27424

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

B. **Ostaszewski, Patrici, , ,**

Mailing Address 54 Bay Way

City  
Brick

State  
NJ

Zip Code  
08723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27233

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

C. **Ostaszewski, Patrici, , ,**

Mailing Address 54 Bay Way

City  
Brick

State  
NJ

Zip Code  
08723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27348

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

110.00



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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Ostaszewski, Patrici, , ,**

Mailing Address 54 Bay Way

City  
Brick

State  
NJ

Zip Code  
08723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27425**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

**B. Pearson, Dawn, S., ,**

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 (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27271**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Pearson, Dawn, S., ,**

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 (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27349**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

70.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Pearson, Dawn, S., ,**

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 (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27465**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Poynter, William, W., ,**

Mailing Address 1202 Berwick Road

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27235**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**C. Poynter, William, W., ,**

Mailing Address 1202 Berwick Road

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27351**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

60.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Poynter, William, W., ,**

Mailing Address 1202 Berwick Road

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

National Talent Acquisition Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
07 / 27 / 2017

Transaction ID : SA11AI.27427

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

**B. Price, Andrew, L., ,**

Mailing Address 72 Nolen Street

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

MM / DD / YYYY  
07 / 06 / 2017

Transaction ID : SA11AI.27236

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**C. Price, Andrew, L., ,**

Mailing Address 72 Nolen Street

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

980.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2017

Transaction ID : SA11AI.27352

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

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

120.00

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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Price, Andrew, L., ,**

Mailing Address 72 Nolen Street

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27428**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction (\$50, 2 weeks)

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

**B. Rosene, Robert, J., ,**

Mailing Address 9747 West Vandeventor Drive

City  
Littleton

State  
CO

Zip Code  
80128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Human Resources Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27429**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Shafer, Kathleen, A., ,**

Mailing Address 1827 Sentry Oak Court

City  
Orange Park

State  
FL

Zip Code  
32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27239**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

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

90.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Shafer, Kathleen, A., ,**

Mailing Address 1827 Sentry Oak Court

City  
Orange Park

State  
FL

Zip Code  
32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11AI.27357**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**B. Shafer, Kathleen, A., ,**

Mailing Address 1827 Sentry Oak Court

City  
Orange Park

State  
FL

Zip Code  
32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Chief Nursing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11AI.27432**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Payroll Deduction (\$25, 2 weeks)

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

**C. Skripps, Michele, M., ,**

Mailing Address 122 Pine Ridge Drive

City  
Belton

State  
SC

Zip Code  
29627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11AI.27240**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

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

70.00

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

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

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(check only one)

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

**HealthSouth Corporation Political Action Committee**

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

A. Skripps, Michele, M., ,

Mailing Address 122 Pine Ridge Drive

City  
Belton

State  
SC

Zip Code  
29627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27358

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

B. Skripps, Michele, M., ,

Mailing Address 122 Pine Ridge Drive

City  
Belton

State  
SC

Zip Code  
29627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Hospital 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 / 27 / 2017

Transaction ID : SA11AI.27433

Amount of Each Receipt this Period

20.00

☐ Memo Item

Payroll Deduction (\$20, 2 weeks)

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

C. Smith, Walter, C., ,

Mailing Address 1040 Broadway Street

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
State Regulatory Affairs Director

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 / 27 / 2017

Transaction ID : SA11AI.27435

Amount of Each Receipt this Period

15.00

☐ Memo Item

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  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Taggart, Dean, , ,**

Mailing Address 704 Guardbridge Court

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Inspector General

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27440**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**B. Terry, Sheila, , ,**

Mailing Address 177 Wisteria Dr.

City  
Chelsea

State  
AL

Zip Code  
35043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27441**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

**C. Treadway, Michael, G., ,**

Mailing Address 1884 West Holly Trail

City  
Hawkins

State  
TX

Zip Code  
75570

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11Al.27368**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

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

60.00



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 40 OF 45

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

HealthSouth Corporation Political Action Committee

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

A. Treadway, Michael, G., ,

Mailing Address 1884 West Holly Trail

City  
HawkinsState  
TXZip Code  
75570FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27468

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction (\$30, 2 weeks)

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

B. Wilder, Linda, Masone, ,

Mailing Address 2335 Ridge Trail

City  
BirminghamState  
ALZip Code  
35242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27251

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

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

C. Wilder, Linda, Masone, ,

Mailing Address 2335 Ridge Trail

City  
BirminghamState  
ALZip Code  
35242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27373

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

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

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

170.00



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

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

**HealthSouth Corporation Political Action Committee**

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

**A. Wilder, Linda, Masone, ,**

Mailing Address 2335 Ridge Trail

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27443**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction (\$70, 2 weeks)

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

**B. Willey, Donn, G., ,**

Mailing Address 1932 River Woods Road

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Compensation Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11Al.27374**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

**C. Willey, Donn, G., ,**

Mailing Address 1932 River Woods Road

City  
Hoover

State  
AL

Zip Code  
35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
National Compensation Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27444**

Amount of Each Receipt this Period

19.00

☐ Memo Item

Payroll Deduction (\$19, 2 weeks)

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

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

108.00

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

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

HealthSouth Corporation Political Action Committee

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

A. Wilson, Arthur, E., Jr.

Mailing Address 5947 South Shades Crest Rd

City  
BessemerState  
ALZip Code  
35022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27253

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

B. Wilson, Arthur, E., Jr.

Mailing Address 5947 South Shades Crest Rd

City  
BessemerState  
ALZip Code  
35022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27375

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

C. Wilson, Arthur, E., Jr.

Mailing Address 5947 South Shades Crest Rd

City  
BessemerState  
ALZip Code  
35022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth CorporationOccupation (for Individual)  
Chief Real Estate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1076.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27445

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction (\$76.92, 2 weeks)

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

230.76

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**HealthSouth Corporation Political Action Committee**

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

**A. Winters, James, R., ,**

Mailing Address 4168 Crossings Lane

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

**Transaction ID : SA11Al.27498**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. Wisner, Robert, M., ,**

Mailing Address 1020 Eagle Lake Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Reimbursement Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2017

**Transaction ID : SA11Al.27255**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

**C. Wisner, Robert, M., ,**

Mailing Address 1020 Eagle Lake Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Reimbursement Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

**Transaction ID : SA11Al.27377**

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

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

576.00

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

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

HealthSouth Corporation Political Action Committee

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

A. Wisner, Robert, M, ,

Mailing Address 1020 Eagle Lake Circle

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Reimbursement Senior Vice 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 / 27 / 2017

Transaction ID : SA11AI.27447

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction (\$38, 2 weeks)

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

B. Wittig, William, Forrest, ,

Mailing Address 3969 Haddon Circle

City  
Hoover

State  
AL

Zip Code  
35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Operations Director

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 / 27 / 2017

Transaction ID : SA11AI.27448

Amount of Each Receipt this Period

15.00

☐ Memo Item

Payroll Deduction (\$15, 2 weeks)

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

C. Yeager, Russell, , ,

Mailing Address 1348 Saddlecreek Parkway

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HealthSouth Corporation

Occupation (for Individual)

Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2017

Transaction ID : SA11AI.27257

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

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

93.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

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

A. Yeager, Russell, , ,

Mailing Address 1348 Saddlecreek Parkway

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2017

Transaction ID : SA11AI.27379

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

B. Yeager, Russell, , ,

Mailing Address 1348 Saddlecreek Parkway

City  
Birmingham

State  
AL

Zip Code  
35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HealthSouth Corporation

Occupation (for Individual)  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.27449

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

80.00

6955.76