

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
HealthSouth Corporation Political Action Committee

ADDRESS (number and street) One HealthSouth Parkway
 Check if different than previously reported. (ACC)
Birmingham AL 35243

2. **FEC IDENTIFICATION NUMBER** C00414649
3. IS THIS REPORT NEW (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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on 11 07 2006 in the State of
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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

Type or Print Name of Treasurer Tyler C. Murphy

Signature of Treasurer Electronically Filed by Tyler C. Murphy Date 10 30 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		15400.96
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	7048.19									
(c) Total Receipts (from Line 19)	2230.03	47021.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9278.22	62422.22								
7. Total Disbursements (from Line 31)	2500.00	55644.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6778.22	6778.22								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	1839.26	33364.03
(i) Itemized (use Schedule A)	390.77	13657.23
(ii) Unitemized	2230.03	47021.26
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2230.03	47021.26
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 Transfer (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))	2230.03	47021.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2230.03	47021.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	44.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	44.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	55600.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2500.00	55644.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2500.00	55644.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2230.03	47021.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2230.03	47021.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	44.00
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	44.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. James A Allen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 436 Golf Drive		Transaction ID: SA11A1.6191	
City Hoover	State AL	Zip Code 35226	Amount of Each Receipt this Period 28.50
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$28.50, 2 weeks)	
Name of Employer HealthSouth	Occupation VP Operations Support		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.50		

Full Name (Last, First, Middle Initial) B. Christine Bachrach		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 3725 Dunbarton Drive		Transaction ID: SA11A1.6193	
City Mountain Brook	State AL	Zip Code 35223	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$25, 2 weeks)	
Name of Employer HealthSouth	Occupation VP Compliance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) C. Jeffrey P Blackwood		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 276 Stonebridge Rd		Transaction ID: SA11A1.6196	
City Birmingham	State AL	Zip Code 35210	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30, 2 weeks)	
Name of Employer HealthSouth	Occupation VP - Design and Construction		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		

SUBTOTAL of Receipts This Page (optional) ▶	83.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Donna Bourdon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 9718 Snow Hill Rd		Transaction ID: SA11A1.6181	
City Ooltewah	State TN	Zip Code 37363	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Donna Bourdon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 9718 Snow Hill Rd		Transaction ID: SA11A1.6257	
City Ooltewah	State TN	Zip Code 37363	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. Michael Bullitt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 3711 Kessler		Transaction ID: SA11A1.6258	
City Wichita Falls	State TX	Zip Code 76309	Amount of Each Receipt this Period 8.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$8, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00		

SUBTOTAL of Receipts This Page (optional) ▶	28.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Charles Byrd, III

Mailing Address 3609 Ridgecrest Road

City Birmingham State AL Zip Code 35223

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

Name of Employer HealthSouth Occupation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6200

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Randall Carpenter

Mailing Address 3754 Carisbrooke Drive

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6201

Amount of Each Receipt this Period
 40.00

Payroll Deduction (\$40, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Joseph Thomas Clark

Mailing Address 4012 Lenox Road

City Birmingham State AL Zip Code 35213

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

Name of Employer HealthSouth Occupation President - Surgery Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1617.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6202

Amount of Each Receipt this Period
 77.00

Payroll Deduction (\$77, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	137.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Dr. Dexanne B. Clohan

Mailing Address 235 Cahaba River Parc

City Birmingham State AL Zip Code 35243

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

Name of Employer HealthSouth Occupation Chief Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6203

Amount of Each Receipt this Period
 192.00

Payroll Deduction (\$192, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Kevin R Conn

Mailing Address 10456 N.W. 48th Manor

City Coral Springs State FL Zip Code 33076

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

Name of Employer HealthSouth Occupation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.6176

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Kevin R Conn

Mailing Address 10456 N.W. 48th Manor

City Coral Springs State FL Zip Code 33076

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

Name of Employer HealthSouth Occupation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.6259

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	232.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. David J DeGumbia		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 383 Pattonwood Way		Transaction ID: SA11A1.6189	
City Southington	State CT	Zip Code 06489	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation VP - Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name (Last, First, Middle Initial) B. David J DeGumbia		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 383 Pattonwood Way		Transaction ID: SA11A1.6260	
City Southington	State CT	Zip Code 06489	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation VP - Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Kristen DeHart		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1542 Canterbury Ln		Transaction ID: SA11A1.6205	
City Liberty	State MO	Zip Code 64068	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

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

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

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

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

Full Name (Last, First, Middle Initial) A. Daniel V Dourney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 3924 Turkey Point		Transaction ID: SA11A1.6208	
City State Zip Code Melbourne FL 32934	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP Operations	Aggregate Year-to-Date ▼ 1050.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Elaine Ebaugh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 4331 38th Way S.		Transaction ID: SA11A1.6177	
City State Zip Code St Petersburg FL 33711	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)		
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Elaine Ebaugh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 4331 38th Way S.		Transaction ID: SA11A1.6261	
City State Zip Code St Petersburg FL 33711	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)		
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial)
Laurie English

Mailing Address 904 Emerald Blvd

City State Zip Code
Southlake TX 76902

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

Name of Employer HealthSouth Occupation Senior VP - Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6209

Amount of Each Receipt this Period
75.00

Payroll deduction (\$75, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Marconia Goff

Mailing Address 1500 Highland Lake Trails

City State Zip Code
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation Senior VP - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1197.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6210

Amount of Each Receipt this Period
57.00

Payroll Deduction (\$57, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Darryl E Gotwalt

Mailing Address 7109 York Rd

City State Zip Code
Baltimore MD 21212

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

Name of Employer HealthSouth Occupation VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.6190

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	152.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Darryl E Gotwalt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 7109 York Rd		Transaction ID: SA11A1.6263	
City State Zip Code Baltimore MD 21212	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20, 2 weeks)		
Name of Employer HealthSouth Occupation VP Operations	Aggregate Year-to-Date ▼ 420.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jerry Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 7130 East Saddleback St Apt. 56		Transaction ID: SA11A1.6211	
City State Zip Code Mesa AZ 85207	Amount of Each Receipt this Period 56.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$56, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP Operations	Aggregate Year-to-Date ▼ 1176.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Karen Hartigan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1369 Oxford St		Transaction ID: SA11A1.6212	
City State Zip Code Mahwah NJ 07430	Amount of Each Receipt this Period 19.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks)		
Name of Employer HealthSouth Occupation VP Sales and Marketing	Aggregate Year-to-Date ▼ 399.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	95.00
TOTAL This Period (last page this line number only) ▶	

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

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

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

A. Full Name (Last, First, Middle Initial)
Rosa Hooper

Mailing Address 4201 Kennesaw Drive

City State Zip Code
Birmingham AL 35213

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

Name of Employer HealthSouth Occupation CFO - Diagnostic Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1615.32

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6216

Amount of Each Receipt this Period
76.92

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 808 Parkview Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation CFO - Inpatient Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 986.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6220

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Teresa Kline

Mailing Address 531 Cahaba River Parc

City State Zip Code
Birmingham AL 35243

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

Name of Employer HealthSouth Occupation Senior VP - Managed Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6221

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	174.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 23 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. John Markus Mailing Address 3218 Pine Ridge Rd <hr/> City State Zip Code Birmingham AL 35213 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 <hr/> Transaction ID: SA11A1.6224 <hr/> Amount of Each Receipt this Period 76.92 <hr/> Payroll Deduction (\$76.92, 2 weeks)
Name of Employer HealthSouth Occupation Chief Compliance Officer <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Aggregate Year-to-Date ▼ 1615.32	

Full Name (Last, First, Middle Initial) B. Michael D Martin Mailing Address 2693 County Rd 5 <hr/> City State Zip Code Jemison AL 35085 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 <hr/> Transaction ID: SA11A1.6225 <hr/> Amount of Each Receipt this Period 30.00 <hr/> Payroll Deduction (\$30, 2 weeks)
Name of Employer HealthSouth Occupation VP Tax <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. Terry R Maxhimer Mailing Address 4817 Wood Springs Ln <hr/> City State Zip Code Birmingham AL 35226 <hr/> FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6 <hr/> Transaction ID: SA11A1.6226 <hr/> Amount of Each Receipt this Period 75.00 <hr/> Payroll Deduction (\$75, 2 weeks)
Name of Employer HealthSouth Occupation SVP Inpatient Operations <hr/> Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Aggregate Year-to-Date ▼ 1575.00	

SUBTOTAL of Receipts This Page (optional)	181.92
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Denise B McGrath		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 222 River Walk Dr		Transaction ID: SA11A1.6175	
City Melbourne Beach	State FL	Zip Code 32951	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Denise B McGrath		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 6	
Mailing Address 222 River Walk Dr		Transaction ID: SA11A1.6266	
City Melbourne Beach	State FL	Zip Code 32951	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. Steven A McPherson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 2031 Eagle Creek Circle		Transaction ID: SA11A1.6227	
City Birmingham	State AL	Zip Code 35242	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30, 2 weeks)	
Name of Employer HealthSouth	Occupation CFO - Outpatient Division		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		

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

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

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

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

A. Full Name (Last, First, Middle Initial)
Randall M Mink

Mailing Address 2043 Blue Heron Circle

City State Zip Code
Birmingham AL 35242

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

Name of Employer HealthSouth Occupation Senior VP Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 798.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6228

Amount of Each Receipt this Period
 38.00

Payroll Deduction (\$38, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Mary K Moscato

Mailing Address 22 Andrews Rd

City State Zip Code
Wakefield MA 01882

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

Name of Employer HealthSouth Occupation Senior VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6229

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Donald W. Myers

Mailing Address 3649 Brookwood Rd

City State Zip Code
Birmingham AL 35223

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

Name of Employer HealthSouth Occupation Senior VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6230

Amount of Each Receipt this Period
 50.00

Payroll Deduction (\$50, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	108.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Patricia Ostaszewski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 54 Bay Way Drive		Transaction ID: SA11A1.6231	
City State Zip Code Brick NJ 08723	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25, 2 weeks)		
Name of Employer HealthSouth Occupation VP Operations	Aggregate Year-to-Date ▼ 525.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jane B Pitts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 4347 Paxton Way		Transaction ID: SA11A1.6234	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20, 2 weeks)		
Name of Employer HealthSouth Occupation Controller - Surgery Division	Aggregate Year-to-Date ▼ 420.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mark J Rice		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 182 Jill Loop		Transaction ID: SA11A1.6237	
City State Zip Code Ruston LA 71270	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)		
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Scott Rifkin		Date of Receipt MM / DD / YYYY 10 / 12 / 2006
Mailing Address 2188 Aspen		Transaction ID: SA11A1.6238
City Tustin Ranch	State CA	Zip Code 92782
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 10.00
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator	Payroll Deduction (\$10, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Mark J Tarr		Date of Receipt MM / DD / YYYY 10 / 12 / 2006
Mailing Address 1039 Williams Trace		Transaction ID: SA11A1.6243
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 38.00
Name of Employer HealthSouth	Occupation President - Inpatient Division	Payroll Deduction (\$38, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2798.00	

Full Name (Last, First, Middle Initial) C. Christopher Throckmorton		Date of Receipt MM / DD / YYYY 10 / 12 / 2006
Mailing Address 1010 Parkwood Road		Transaction ID: SA11A1.6244
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer HealthSouth	Occupation VP Operations	Payroll Deduction (\$50, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional)	98.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Sandra Kaye Vollman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 2908 Glenstone Circle		Transaction ID: SA11A1.6245	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP Finance	Aggregate Year-to-Date ▼ 840.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dennis Wade		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 3709 Wyngate Cove		Transaction ID: SA11A1.6246	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP Human Resources	Aggregate Year-to-Date ▼ 798.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Linda Masone Wilder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 2335 Ridge Trail		Transaction ID: SA11A1.6248	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (38, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP Operations	Aggregate Year-to-Date ▼ 798.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	116.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1615.32

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6249

Amount of Each Receipt this Period
 76.92

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 7054 North Highfield Dr

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1617.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6252

Amount of Each Receipt this Period
 77.00

Payroll Deduction (\$77, 2 weeks)

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

Mailing Address 628 Springbank Terrace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation VP Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.6253

Amount of Each Receipt this Period
 19.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	172.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 23	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Matthew Zurek

Mailing Address 9300 Tottenham Ct

City State Zip Code
Austin TX 78729

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

Name of Employer HealthSouth Occupation VP - Clinical Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	6

Transaction ID: SA11A1.6254

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	▶	25.00
TOTAL This Period (last page this line number only)	▶	1839.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 (Last, First, Middle Initial) A. FRIENDS OF BUD CRAMER		Transaction ID: SB23.6173																					
Mailing Address P.O. Box 2621		Date of Disbursement																					
City Huntsville State AL Zip Code 35804		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name ROBERT EDWARD BUD JR CRAMER		<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: AL District: 05		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. PEOPLE WITH HART INC		Transaction ID: SB23.6172																					
Mailing Address P.O. Box 435		Date of Disbursement																					
City Wexford State PA Zip Code 15090		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	0		2	0	0	6														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name MELISSA A. HART		<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>		1500.00																			
1500.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: PA District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

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