

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		29357.54
(b) Cash on Hand at Beginning of Reporting Period.....	6110.67	
(c) Total Receipts (from Line 19)	9948.96	72032.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16059.63	101390.06
7. Total Disbursements (from Line 31).....	0.00	85330.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	16059.63	16059.63
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: 10 / 16 / 2014 To: 11 / 24 / 2014

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).....	9354.20	38539.18
(ii) Unitemized	594.76	19993.34
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9948.96	58532.52
(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)	9948.96	58532.52
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	13500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	9948.96	72032.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9948.96	72032.52

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2300.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2300.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	83000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	30.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	30.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	85330.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	85330.43

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9948.96	58532.52
34. Total Contribution Refunds (from Line 28(d))	0.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9948.96	58502.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	2300.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	2300.43

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 115
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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

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

A. Steven Charles Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Louanis Drive
 City Reading State MA Zip Code 01867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Director of Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : SA11AI.20066
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

B. Steven Charles Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Louanis Drive
 City Reading State MA Zip Code 01867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Director of Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20170
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

C. Steven Charles Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Louanis Drive
 City Reading State MA Zip Code 01867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Director of Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20274
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 115
	<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. Steven Charles Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Louanis Drive
 City Reading State MA Zip Code 01867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional Director of Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20378
 Amount of Each Receipt this Period **200.00**
 Payroll Deduction (\$20, 2 weeks)

B. Steven L. Alwine
 Full Name (Last, First, Middle Initial)
 Mailing Address 792 West Aaron Drive
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20171
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction (\$10, 2 weeks)

C. Steven L. Alwine
 Full Name (Last, First, Middle Initial)
 Mailing Address 792 West Aaron Drive
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20275
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 115
	<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. Steven L. Alwine
 Full Name (Last, First, Middle Initial)
 Mailing Address 792 West Aaron Drive
 City State Zip Code
 State College PA 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Controller
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20379
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

B. Kenneth J Anthony
 Full Name (Last, First, Middle Initial)
 Mailing Address 734 10th Street
 City State Zip Code
 Oakmont PA 15139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.20069
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

C. Kenneth J Anthony
 Full Name (Last, First, Middle Initial)
 Mailing Address 734 10th Street
 City State Zip Code
 Oakmont PA 15139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20173
 Amount of Each Receipt this Period
 20.00
 Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 115
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

City Oakmont	State PA	Zip Code 15139
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20277

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20381

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Tony Bennett
Full Name (Last, First, Middle Initial)
Mailing Address 3108 Preserve Rookery Blvd

City Panama City Beach	State FL	Zip Code 32408
---------------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20071

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 115
	<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. Tony Bennett
Full Name (Last, First, Middle Initial)

Mailing Address 3108 Preserve Rookery Blvd

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20175

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

B. Tony Bennett
Full Name (Last, First, Middle Initial)

Mailing Address 3108 Preserve Rookery Blvd

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20279

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Tony Bennett
Full Name (Last, First, Middle Initial)

Mailing Address 3108 Preserve Rookery Blvd

City	State	Zip Code
Panama City Beach	FL	32408

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

Name of Employer	Occupation
HealthSouth Corporation	Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20383

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 115
(check only one)

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

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

A. David Berry
Full Name (Last, First, Middle Initial)
Mailing Address 175 Central Street

City North Reading	State MA	Zip Code 01864
-----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional Director of Managed Care
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20072

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. David Berry
Full Name (Last, First, Middle Initial)
Mailing Address 175 Central Street

City North Reading	State MA	Zip Code 01864
-----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Regional Director of Managed Care
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20176

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

C. David Berry
Full Name (Last, First, Middle Initial)
Mailing Address 175 Central Street

City North Reading	State MA	Zip Code 01864
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Regional Director of Managed Care
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20280

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 115
	<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. David Berry			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.20384
Mailing Address 175 Central Street			Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City North Reading	State MA	Zip Code 01864	
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth Corporation	Occupation Regional Director of Managed Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00		

Full Name (Last, First, Middle Initial) B. Marcus John Braz			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014 Transaction ID : SA11AI.20073
Mailing Address 8291 Deerbrook Circle			Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, weeks)
City Sarasota	State FL	Zip Code 34238	
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth Corporation	Occupation Hospital CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Marcus John Braz			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 Transaction ID : SA11AI.20177
Mailing Address 8291 Deerbrook Circle			Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, weeks)
City Sarasota	State FL	Zip Code 34238	
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth Corporation	Occupation Hospital CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Marcus John Braz
Full Name (Last, First, Middle Initial)
Mailing Address 8291 Deerbrook Circle

City Sarasota	State FL	Zip Code 34238
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20281

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, weeks)

B. Marcus John Braz
Full Name (Last, First, Middle Initial)
Mailing Address 8291 Deerbrook Circle

City Sarasota	State FL	Zip Code 34238
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20385

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, weeks)

C. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20074

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 115
	<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. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20178

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

B. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20282

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Jennifer Brewer
Full Name (Last, First, Middle Initial)
Mailing Address 6613 Fox View Drive

City Edwardsville	State IL	Zip Code 62025
----------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20386

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20075

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20179

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20283

Amount of Each Receipt this Period

40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 115
<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. Frank Brown, Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 24507 Old Windmill Trail
City Hockley State TX Zip Code 77447
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **920.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20387
Amount of Each Receipt this Period **40.00**
Payroll Deduction (\$40, 2 weeks)

B. Terrence Brown
Full Name (Last, First, Middle Initial)
Mailing Address 5217 Meadow Garden Lane
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthsouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **380.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : SA11AI.20076
Amount of Each Receipt this Period **19.00**
Payroll Deduction (\$19, 2 weeks)

C. Terrence Brown
Full Name (Last, First, Middle Initial)
Mailing Address 5217 Meadow Garden Lane
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthsouth Corporation Occupation Regional President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **399.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20180
Amount of Each Receipt this Period **19.00**
Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **78.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20284

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **437.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20388

Amount of Each Receipt this Period

19.00

Payroll Deduction (\$19, 2 weeks)

C. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Controller
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20077

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	53.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 115
	<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. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Controller
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20181

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

B. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Controller
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20285

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. Phylis A. Buck
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 770068

City Memphis	State TN	Zip Code 38177
-----------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital Controller
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20389

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 115
	<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. Michael L. Bullitt		Date of Receipt MM / DD / YYYY 10 / 16 / 2014 Transaction ID : SA11AI.20078
Mailing Address 3711 Kessler		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Wichita Falls	State TX	Zip Code 76309
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Michael L. Bullitt		Date of Receipt MM / DD / YYYY 10 / 28 / 2014 Transaction ID : SA11AI.20182
Mailing Address 3711 Kessler		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Wichita Falls	State TX	Zip Code 76309
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Michael L. Bullitt		Date of Receipt MM / DD / YYYY 11 / 01 / 2014 Transaction ID : SA11AI.20286
Mailing Address 3711 Kessler		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Wichita Falls	State TX	Zip Code 76309
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 115
	<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. Michael L. Bullitt
Full Name (Last, First, Middle Initial)

Mailing Address 3711 Kessler

City State Zip Code
Wichita Falls TX 76309

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.20391

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

B. Luanne B. Burton
Full Name (Last, First, Middle Initial)

Mailing Address 136 Providence Road

City State Zip Code
Leesville SC 29070

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

Name of Employer Occupation
HealthSouth Corporation Director Human Resources

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
10 / 28 / 2014
Transaction ID : SA11AI.20183

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Luanne B. Burton
Full Name (Last, First, Middle Initial)

Mailing Address 136 Providence Road

City State Zip Code
Leesville SC 29070

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

Name of Employer Occupation
HealthSouth Corporation Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2014
Transaction ID : SA11AI.20287

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 115
	<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. Luanne B. Burton
Full Name (Last, First, Middle Initial)

Mailing Address 136 Providence Road

City Leesville State SC Zip Code 29070

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

Name of Employer HealthSouth Corporation Occupation Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : **SA11AI.20392**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Barbara L. Butler
Full Name (Last, First, Middle Initial)

Mailing Address 2444 Oak Bend Place

City Newburgh State IN Zip Code 47630

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : **SA11AI.20184**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Barbara L. Butler
Full Name (Last, First, Middle Initial)

Mailing Address 2444 Oak Bend Place

City Newburgh State IN Zip Code 47630

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : **SA11AI.20288**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Barbara L. Butler
Full Name (Last, First, Middle Initial)

Mailing Address 2444 Oak Bend Place

City Newburgh State IN Zip Code 47630

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20393

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

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 Corporation Occupation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20081

Amount of Each Receipt this Period **24.00**

Payroll Deduction (\$24, 2 weeks)

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

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 Corporation Occupation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **504.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20185

Amount of Each Receipt this Period **24.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **528.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20289
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

B. Charles Richard Byrd III
 Full Name (Last, First, Middle Initial)
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **552.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20394
 Amount of Each Receipt this Period **24.00**
 Payroll Deduction (\$24, 2 weeks)

C. Wayne Cermak
 Full Name (Last, First, Middle Initial)
 Mailing Address 10529 Hendon Street
 City Austin State TX Zip Code 78748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Risk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20186
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 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**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 115
<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. Wayne Cermak
Full Name (Last, First, Middle Initial)
Mailing Address 10529 Hendon Street
City Austin State TX Zip Code 78748
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Risk
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20290
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

B. Wayne Cermak
Full Name (Last, First, Middle Initial)
Mailing Address 10529 Hendon Street
City Austin State TX Zip Code 78748
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Risk
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20396
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

c. Mary H. Clarke
Full Name (Last, First, Middle Initial)
Mailing Address 775 Williamsburg Drive
City Brick State NJ Zip Code 08724
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Marketing Operations Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20187
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **30.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 115
	<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. Mary H. Clarke
Full Name (Last, First, Middle Initial)
Mailing Address 775 Williamsburg Drive

City Brick	State NJ	Zip Code 08724
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20291

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Mary H. Clarke
Full Name (Last, First, Middle Initial)
Mailing Address 775 Williamsburg Drive

City Brick	State NJ	Zip Code 08724
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20397

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Dr. Dexanne B. Clohan
Full Name (Last, First, Middle Initial)
Mailing Address 2351 River Grand Drive

City Birmingham	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Medical Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20084

Amount of Each Receipt this Period
192.00

Payroll Deduction (\$192, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	212.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 115
	<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. Dr. Dexanne B. Clohan

Full Name (Last, First, Middle Initial)
Mailing Address 2351 River Grand Drive

City Birmingham	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Medical Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4032.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20188

Amount of Each Receipt this Period
192.00

Payroll Deduction (\$192, 2 weeks)

B. Dr. Dexanne B. Clohan

Full Name (Last, First, Middle Initial)
Mailing Address 2351 River Grand Drive

City Birmingham	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Medical Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20292

Amount of Each Receipt this Period
192.00

Payroll Deduction (\$192, 2 weeks)

C. Dr. Dexanne B. Clohan

Full Name (Last, First, Middle Initial)
Mailing Address 2351 River Grand Drive

City Birmingham	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Chief Medical Officer
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20398

Amount of Each Receipt this Period
192.00

Payroll Deduction (\$192, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	576.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 115
	<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. Georgeanne Cole

Mailing Address PO Box 8341

City	State	Zip Code
Gray	TN	37615

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Chief Operating Officer

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
10	/	28	/	2014

Transaction ID : SA11AI.20189

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Georgeanne Cole

Mailing Address PO Box 8341

City	State	Zip Code
Gray	TN	37615

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20293

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Georgeanne Cole

Mailing Address PO Box 8341

City	State	Zip Code
Gray	TN	37615

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

Name of Employer	Occupation
HealthSouth Corporation	Hospital Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20399

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 115
	<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. Kevin R. Conn
Full Name (Last, First, Middle Initial)

Mailing Address 10456 N.W. 48th Manor

City State Zip Code
Coral Springs FL 33076

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

Name of Employer Occupation
HealthSouth Corporation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014
Transaction ID : SA11AI.20086

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 10456 N.W. 48th Manor

City State Zip Code
Coral Springs FL 33076

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

Name of Employer Occupation
HealthSouth Corporation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014
Transaction ID : SA11AI.20190

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 10456 N.W. 48th Manor

City State Zip Code
Coral Springs FL 33076

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

Name of Employer Occupation
HealthSouth Corporation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014
Transaction ID : SA11AI.20294

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 115
	<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. Kevin R. Conn
Full Name (Last, First, Middle Initial)

Mailing Address 10456 N.W. 48th Manor

City State Zip Code
Coral Springs FL 33076

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

Name of Employer Occupation
HealthSouth Corporation Vice President - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
11 / 21 / 2014

Transaction ID : SA11AI.20400

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 19 Buckingham Drive

City State Zip Code
Bow NH 03304

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 16 / 2014

Transaction ID : SA11AI.20090

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 19 Buckingham Drive

City State Zip Code
Bow NH 03304

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

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
10 / 28 / 2014

Transaction ID : SA11AI.20194

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20298
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

B. Catherine V. Devaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **345.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20405
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

C. Tracy Ewing
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 519
 City Reedsville State PA Zip Code 17084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Marketing Operations Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20197
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 115
<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. Tracy Ewing		Date of Receipt MM / DD / YYYY 11 / 01 / 2014 Transaction ID : SA11AI.20301
Mailing Address PO Box 519		Amount of Each Receipt this Period 10.00
City Reedsville	State PA	Zip Code 17084
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Marketing Operations Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
		Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial) B. Tracy Ewing		Date of Receipt MM / DD / YYYY 11 / 21 / 2014 Transaction ID : SA11AI.20408
Mailing Address PO Box 519		Amount of Each Receipt this Period 10.00
City Reedsville	State PA	Zip Code 17084
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Marketing Operations Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
		Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial) C. Edmund M. Fay		Date of Receipt MM / DD / YYYY 10 / 16 / 2014 Transaction ID : SA11AI.20094
Mailing Address 527 Valley Road		Amount of Each Receipt this Period 83.00
City Birmingham	State AL	Zip Code 35206
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation SVP Treasury
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1660.00	
		Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	103.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 115
	<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. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1743.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.20198

Amount of Each Receipt this Period
83.00

Payroll Deduction (\$83, 2 weeks)

B. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1826.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20302

Amount of Each Receipt this Period
83.00

Payroll Deduction (\$83, 2 weeks)

C. Edmund M. Fay
Full Name (Last, First, Middle Initial)

Mailing Address 527 Valley Road

City Birmingham State AL Zip Code 35206

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

Name of Employer HealthSouth Corporation Occupation SVP Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1909.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20409

Amount of Each Receipt this Period
83.00

Payroll Deduction (\$83, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	249.00
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 33 OF 115
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Tammy E. Feuer
 Mailing Address 73 N. Woodland Avenue
 City State Zip Code
 Woodbury NJ 08096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20199
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Tammy E. Feuer
 Mailing Address 73 N. Woodland Avenue
 City State Zip Code
 Woodbury NJ 08096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20303
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Tammy E. Feuer
 Mailing Address 73 N. Woodland Avenue
 City State Zip Code
 Woodbury NJ 08096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20410
 Amount of Each Receipt this Period
 10.00
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 115
	<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 A. Filler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 Transaction ID : SA11AI.20200
Mailing Address 400 Ruskin Drive		Amount of Each Receipt this Period 10.00
City Altoona	State PA	Zip Code 16602
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Corporation	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. Scott A. Filler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014 Transaction ID : SA11AI.20304
Mailing Address 400 Ruskin Drive		Amount of Each Receipt this Period 10.00
City Altoona	State PA	Zip Code 16602
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Corporation	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. Scott A. Filler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.20411
Mailing Address 400 Ruskin Drive		Amount of Each Receipt this Period 10.00
City Altoona	State PA	Zip Code 16602
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 115
	<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. Mark K. Freeburn
Full Name (Last, First, Middle Initial)

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
10 / 16 / 2014
Transaction ID : SA11AI.20097

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
10 / 28 / 2014
Transaction ID : SA11AI.20201

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20305

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 115
	<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. Mark K. Freeburn
Full Name (Last, First, Middle Initial)

Mailing Address 551 Windsor Drive

City Middletown State PA Zip Code 17057

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20413

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

B. Deborah L. Gerke
Full Name (Last, First, Middle Initial)

Mailing Address 9320 Sienna Ridge Drive

City Las Vegas State NV Zip Code 89117

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

Name of Employer HealthSouth Corporation Occupation Hospital Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20202

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Deborah L. Gerke
Full Name (Last, First, Middle Initial)

Mailing Address 9320 Sienna Ridge Drive

City Las Vegas State NV Zip Code 89117

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

Name of Employer HealthSouth Corporation Occupation Hospital Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20306

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **35.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 115
	<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. Deborah L. Gerke

Mailing Address 9320 Sienna Ridge Drive

City Las Vegas State NV Zip Code 89117

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

Name of Employer HealthSouth Corporation Occupation Hospital Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 / /
11 / 21 / 2014

Transaction ID : SA11AI.20414

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation Reginal President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1120.00**

Date of Receipt
 / /
10 / 16 / 2014

Transaction ID : SA11AI.20099

Amount of Each Receipt this Period
 56.00

Payroll Deduction (\$56, 2 weeks)

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

Mailing Address 7130 East Saddleback Street Apt. 56

City Mesa State AZ Zip Code 85207

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

Name of Employer HealthSouth Corporation Occupation Reginal President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1176.00**

Date of Receipt
 / /
10 / 28 / 2014

Transaction ID : SA11AI.20203

Amount of Each Receipt this Period
 56.00

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 122.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 115
	<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. Jerry Gray		Date of Receipt MM / DD / YYYY 11 / 01 / 2014 Transaction ID : SA11AI.20307
Mailing Address 7130 East Saddleback Street Apt. 56		Amount of Each Receipt this Period 56.00
City Mesa	State AZ	Zip Code 85207
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$56, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation Reginal President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00	

Full Name (Last, First, Middle Initial) B. Jerry Gray		Date of Receipt MM / DD / YYYY 11 / 21 / 2014 Transaction ID : SA11AI.20415
Mailing Address 7130 East Saddleback Street Apt. 56		Amount of Each Receipt this Period 56.00
City Mesa	State AZ	Zip Code 85207
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$56, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation Reginal President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1288.00	

Full Name (Last, First, Middle Initial) C. Nicholas David Hardin		Date of Receipt MM / DD / YYYY 10 / 16 / 2014 Transaction ID : SA11AI.20100
Mailing Address 24014 Clover Trails		Amount of Each Receipt this Period 19.00
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation Hospital Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional).....▶	131.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 115
	<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. Nicholas David Hardin		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 24014 Clover Trails		Transaction ID : SA11AI.20204
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer HealthSouth Corporation	Occupation Hospital Administration	Payroll Deduction (\$19, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

Full Name (Last, First, Middle Initial) B. Nicholas David Hardin		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2014
Mailing Address 24014 Clover Trails		Transaction ID : SA11AI.20308
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer HealthSouth Corporation	Occupation Hospital Administration	Payroll Deduction (\$19, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

Full Name (Last, First, Middle Initial) C. Nicholas David Hardin		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2014
Mailing Address 24014 Clover Trails		Transaction ID : SA11AI.20416
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer HealthSouth Corporation	Occupation Hospital Administration	Payroll Deduction (\$19, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.00	

SUBTOTAL of Receipts This Page (optional).....▶	57.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 115
	<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. Kevin Hardy
Full Name (Last, First, Middle Initial)

Mailing Address 1230 Buckhead Drive SW

City Vero Beach State FL Zip Code 32968

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.20205

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1230 Buckhead Drive SW

City Vero Beach State FL Zip Code 32968

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20309

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1230 Buckhead Drive SW

City Vero Beach State FL Zip Code 32968

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

Name of Employer HealthSouth Corporation Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20417

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 115
<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. Susan Heath
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2192

City Brentwood	State TN	Zip Code 37024
-------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20103

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

B. Susan Heath
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2192

City Brentwood	State TN	Zip Code 37024
-------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20207

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Susan Heath
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2192

City Brentwood	State TN	Zip Code 37024
-------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20311

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 115
	<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. Susan Heath			Date of Receipt
Mailing Address PO Box 2192			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.20419
Brentwood	TN	37024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		Payroll Deduction (\$20, 2 weeks)
HealthSouth Corporation	Healthcare Facility Administrator		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Gary Herbek			Date of Receipt
Mailing Address 11565 Hopyard Drive			<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.20208
King George	VA	22485	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Payroll Deduction (\$10, 2 weeks)
HealthSouth Corporation	Hospital Administrator		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Gary Herbek			Date of Receipt
Mailing Address 11565 Hopyard Drive			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.20312
King George	VA	22485	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Payroll Deduction (\$10, 2 weeks)
HealthSouth Corporation	Hospital Administrator		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 115
	<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. Gary Herbek
Full Name (Last, First, Middle Initial)

Mailing Address 11565 Hopyard Drive

City King George State VA Zip Code 22485

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

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20420

Amount of Each Receipt this Period **100.00**

Payroll Deduction (\$10, 2 weeks)

B. William House
Full Name (Last, First, Middle Initial)

Mailing Address 1739 Lake Cyrus Club Drive

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20106

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50, 2 weeks)

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

Mailing Address 1739 Lake Cyrus Club Drive

City Hoover State AL Zip Code 35244

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20210

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20314

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

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

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20422

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50, 2 weeks)

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

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

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

Name of Employer HealthSouth Corporation	Occupation SVP Public Policy, Legislation & Regul
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20107

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 45 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Justin Hunter			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 5221 42nd Street NW			Transaction ID : SA11AI.20211
City Washington	State DC	Zip Code 20015	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 Corporation	Occupation SVP Public Policy, Legislation & Regul	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. Justin Hunter			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014
Mailing Address 5221 42nd Street NW			Transaction ID : SA11AI.20315
City Washington	State DC	Zip Code 20015	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 Corporation	Occupation SVP Public Policy, Legislation & Regul	Aggregate Year-to-Date ▼ 880.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Justin Hunter			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014
Mailing Address 5221 42nd Street NW			Transaction ID : SA11AI.20423
City Washington	State DC	Zip Code 20015	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 Corporation	Occupation SVP Public Policy, Legislation & Regul	Aggregate Year-to-Date ▼ 920.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 115
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

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

Mailing Address 939 Laurel Meadow Lane

City Fort Mill State SC Zip Code 29708

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.20108

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 939 Laurel Meadow Lane

City Fort Mill State SC Zip Code 29708

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.20212

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 939 Laurel Meadow Lane

City Fort Mill State SC Zip Code 29708

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20316

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 939 Laurel Meadow Lane

City Fort Mill State SC Zip Code 29708

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20424

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

B. Barbara Jacobsmeyer
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Herman's Lake Ct

City Florissant State MO Zip Code 63034

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20109

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

C. Barbara Jacobsmeyer
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Herman's Lake Ct

City Florissant State MO Zip Code 63034

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20213

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Barbara Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Ct
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **880.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20317
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

B. Barbara Jacobsmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Herman's Lake Ct
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **920.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20425
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40, 2 weeks)

C. Gregory M. Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 Gardener Road
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20214
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 115
<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. Gregory M. Johnston
Full Name (Last, First, Middle Initial)

Mailing Address 840 Gardener Road

City Rockledge State FL Zip Code 32955

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20318

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Gregory M. Johnston
Full Name (Last, First, Middle Initial)

Mailing Address 840 Gardener Road

City Rockledge State FL Zip Code 32955

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20426

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 1301 South Lincoln Avenue Apt. 904

City Vineland State NJ Zip Code 08361

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

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
10 / 28 / 2014

Transaction ID : SA11AI.20215

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 115
	<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. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 1301 South Lincoln Avenue
Apt. 904

City Vineland State NJ Zip Code 08361

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20319

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 1301 South Lincoln Avenue
Apt. 904

City Vineland State NJ Zip Code 08361

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

Name of Employer HealthSouth Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11AI.20427

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Jill Jordan
Full Name (Last, First, Middle Initial)

Mailing Address 443 Lee Road 2099

City Phenix City State AL Zip Code 36870

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 28 / 2014
Transaction ID : SA11AI.20216

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 115
	<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. Jill Jordan
Full Name (Last, First, Middle Initial)
Mailing Address 443 Lee Road 2099

City Phenix City	State AL	Zip Code 36870
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20320

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Jill Jordan
Full Name (Last, First, Middle Initial)
Mailing Address 443 Lee Road 2099

City Phenix City	State AL	Zip Code 36870
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20429

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Sylvia Kelly
Full Name (Last, First, Middle Initial)
Mailing Address 51 Paa-Ko Drive

City Sandia Park	State NM	Zip Code 87047
---------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20113

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 115
	<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. Sylvia Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 51 Paa-Ko Drive

City Sandia Park State NM Zip Code 87047

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.20217

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Sylvia Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 51 Paa-Ko Drive

City Sandia Park State NM Zip Code 87047

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20321

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Sylvia Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 51 Paa-Ko Drive

City Sandia Park State NM Zip Code 87047

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20430

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert Bradford Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 1432 Notting Hill Cove West

City Hernando	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20218

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

B. Robert Bradford Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 1432 Notting Hill Cove West

City Hernando	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20322

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

C. Robert Bradford Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 1432 Notting Hill Cove West

City Hernando	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20431

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 54 OF 115
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. Mike Kindle

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **646.00**

Date of Receipt
10 / 16 / 2014
Transaction ID : SA11AI.20115

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Mike Kindle

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
10 / 28 / 2014
Transaction ID : SA11AI.20219

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)
C. Mike Kindle

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **722.00**

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20323

Amount of Each Receipt this Period
38.00

Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **114.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 115
	<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. Mike Kindle
Full Name (Last, First, Middle Initial)

Mailing Address 828 Aberlady Place

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : **SA11AI.20432**

Amount of Each Receipt this Period **38.00**

Payroll Deduction (\$38, 2 weeks)

B. James D. Kirkland
Full Name (Last, First, Middle Initial)

Mailing Address 25 County Road 1060

City Clanton State AL Zip Code 35045

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

Name of Employer HealthSouth Corporation Occupation Director of Print Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : **SA11AI.20220**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. James D. Kirkland
Full Name (Last, First, Middle Initial)

Mailing Address 25 County Road 1060

City Clanton State AL Zip Code 35045

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

Name of Employer HealthSouth Corporation Occupation Director of Print Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : **SA11AI.20324**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 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**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 115
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. James D. Kirkland
Full Name (Last, First, Middle Initial)

Mailing Address 25 County Road 1060

City Clanton State AL Zip Code 35045

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

Name of Employer HealthSouth Corporation Occupation Director of Print Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20433

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1160.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20117

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1218.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20221

Amount of Each Receipt this Period **58.00**

Payroll Deduction (\$58, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ► **126.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 808 Parkview Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20325

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

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

Mailing Address 808 Parkview Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1334.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20434

Amount of Each Receipt this Period
58.00

Payroll Deduction (\$58, 2 weeks)

C. Robert Kronenberg
Full Name (Last, First, Middle Initial)

Mailing Address 8743 W. Tierra Buena Lane

City	State	Zip Code
Peoria	AZ	85382

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Pharmacy

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
10	/	28	/	2014

Transaction ID : SA11AI.20222

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 8743 W. Tierra Buena Lane

City Peoria State AZ Zip Code 85382

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20326

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 8743 W. Tierra Buena Lane

City Peoria State AZ Zip Code 85382

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20435

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20119

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **32.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 115
	<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. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.20223

Amount of Each Receipt this Period
12.00

Payroll Deduction (\$12, 2 weeks)

B. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20327

Amount of Each Receipt this Period
12.00

Payroll Deduction (\$12, 2 weeks)

C. Leah Anne Laffey
Full Name (Last, First, Middle Initial)

Mailing Address 801 Elm Spring Road

City Pittsburgh State PA Zip Code 15243

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20436

Amount of Each Receipt this Period
12.00

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 60 OF 115
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 675 Shades Crest Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.20120

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 675 Shades Crest Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20224

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 675 Shades Crest Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20328

Amount of Each Receipt this Period
 20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Stephen D. Leasure
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of General Corp & Securities
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20437
 Amount of Each Receipt this Period **200.00**
 Payroll Deduction (\$20, 2 weeks)

B. Carol Lynne Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 Martin St So
 City Pell City State AL Zip Code 35128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Director Risk Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20225
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction (\$10, 2 weeks)

C. Carol Lynne Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 Martin St So
 City Pell City State AL Zip Code 35128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Director Risk Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20329
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	40.00
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 62 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Carol Lynne Lee
Full Name (Last, First, Middle Initial)

Mailing Address 1811 Martin St So

City State Zip Code
Pell City AL 35128

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

Name of Employer Occupation
HealthSouth Corporation National Director Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.20438

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 8945 Evening Grove Cr

City State Zip Code
Cordova TN 38018

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

Name of Employer Occupation
HealthSouth Corporation VP Home Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014
Transaction ID : SA11AI.20122

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30, 2 weeks)

C. Robert Leech
Full Name (Last, First, Middle Initial)

Mailing Address 8945 Evening Grove Cr

City State Zip Code
Cordova TN 38018

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

Name of Employer Occupation
HealthSouth Corporation VP Home Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014
Transaction ID : SA11AI.20226

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 115
	<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. Phillip E. Loggins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 Transaction ID : SA11AI.20227
Mailing Address 5022 McLaughlin Drive		Amount of Each Receipt this Period 15.00 Payroll Deduction (\$15, 2 weeks)
City Tallahassee	State FL	Zip Code 32309
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 315.00	
Name of Employer HealthSouth Corporation	Occupation Director of Risk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Phillip E. Loggins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014 Transaction ID : SA11AI.20331
Mailing Address 5022 McLaughlin Drive		Amount of Each Receipt this Period 15.00 Payroll Deduction (\$15, 2 weeks)
City Tallahassee	State FL	Zip Code 32309
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 330.00	
Name of Employer HealthSouth Corporation	Occupation Director of Risk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Phillip E. Loggins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.20441
Mailing Address 5022 McLaughlin Drive		Amount of Each Receipt this Period 15.00 Payroll Deduction (\$15, 2 weeks)
City Tallahassee	State FL	Zip Code 32309
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 345.00	
Name of Employer HealthSouth Corporation	Occupation Director of Risk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 115
	<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. Anita Marban
Full Name (Last, First, Middle Initial)

Mailing Address 3530 Fawn Creek Drive

City Kingwood State TX Zip Code 77339

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

Name of Employer HealthSouth Corporation Occupation Chief Nursing Officer

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
10 / 28 / 2014

Transaction ID : SA11AI.20228

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Anita Marban
Full Name (Last, First, Middle Initial)

Mailing Address 3530 Fawn Creek Drive

City Kingwood State TX Zip Code 77339

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

Name of Employer HealthSouth Corporation Occupation Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.20332

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Anita Marban
Full Name (Last, First, Middle Initial)

Mailing Address 3530 Fawn Creek Drive

City Kingwood State TX Zip Code 77339

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

Name of Employer HealthSouth Corporation Occupation Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.20442

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 115
	<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. Robert W. McCallum III		Date of Receipt
Mailing Address 3405 Watertown Place		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City State Zip Code Vestavia Hills AL 35243		Transaction ID : SA11AI.20125
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer HealthSouth Corproation	Occupation Chief Tax Officer	Payroll Deduction (\$38, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="760.00"/>	

Full Name (Last, First, Middle Initial) B. Robert W. McCallum III		Date of Receipt
Mailing Address 3405 Watertown Place		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Vestavia Hills AL 35243		Transaction ID : SA11AI.20229
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer HealthSouth Corproation	Occupation Chief Tax Officer	Payroll Deduction (\$38, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="798.00"/>	

Full Name (Last, First, Middle Initial) C. Robert W. McCallum III		Date of Receipt
Mailing Address 3405 Watertown Place		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code Vestavia Hills AL 35243		Transaction ID : SA11AI.20333
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer HealthSouth Corproation	Occupation Chief Tax Officer	Payroll Deduction (\$38, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="836.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="114.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 67 OF 115
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Robert W. McCallum III
 Mailing Address 3405 Watertown Place
 City State Zip Code
 Vestavia Hills AL 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corproation Chief Tax Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 874.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20443
 Amount of Each Receipt this Period
 38.00
 Payroll Deduction (\$38, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Denise B. McGrath
 Mailing Address 222 River Walk Drive
 City State Zip Code
 Melbourne Beach FL 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.20126
 Amount of Each Receipt this Period
 15.00
 Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)
c. Denise B. McGrath
 Mailing Address 222 River Walk Drive
 City State Zip Code
 Melbourne Beach FL 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Healthcare Facility Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20230
 Amount of Each Receipt this Period
 15.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 222 River Walk Drive

City Melbourne Beach	State FL	Zip Code 32951
-------------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20334

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 222 River Walk Drive

City Melbourne Beach	State FL	Zip Code 32951
-------------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation Healthcare Facility Administrator
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20444

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 8470 Carrington Lakes Cove

City Trussville	State AL	Zip Code 35173
--------------------	-------------	-------------------

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

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

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
10	/	28	/	2014

Transaction ID : SA11AI.20231

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 115
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

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

Mailing Address 8470 Carrington Lakes Cove

City Trussville	State AL	Zip Code 35173
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20335

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 8470 Carrington Lakes Cove

City Trussville	State AL	Zip Code 35173
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20445

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Monnie Moore
Full Name (Last, First, Middle Initial)

Mailing Address 904 Southpoint Circle

City Morgantown	State WV	Zip Code 26501
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20232

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 115
<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. Monnie Moore		Date of Receipt
Mailing Address 904 Southpoint Circle		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Morgantown State WV Zip Code 26501		Transaction ID : SA11AI.20336
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer HealthSouth Corporation Occupation Director of Pharmacy		Payroll Deduction (\$10, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>		

Full Name (Last, First, Middle Initial) B. Monnie Moore		Date of Receipt
Mailing Address 904 Southpoint Circle		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City Morgantown State WV Zip Code 26501		Transaction ID : SA11AI.20446
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer HealthSouth Corporation Occupation Director of Pharmacy		Payroll Deduction (\$10, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>		

Full Name (Last, First, Middle Initial) C. Wanda Morales		Date of Receipt
Mailing Address 309 Chapelwood Drove		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Dothan State AL Zip Code 36303		Transaction ID : SA11AI.20129
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer HealthSouth Corporation Occupation Quality/Risk Director		Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 71 OF 115
	<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. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive

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

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

Name of Employer HealthSouth Corporation	Occupation Quality/Risk Director
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20233

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

B. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive

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

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

Name of Employer HealthSouth Corporation	Occupation Quality/Risk Director
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20337

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

C. Wanda Morales
Full Name (Last, First, Middle Initial)
Mailing Address 309 Chapelwood Drive

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

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

Name of Employer HealthSouth Corporation	Occupation Quality/Risk Director
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20447

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 115
	<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. Ed Mowen
Full Name (Last, First, Middle Initial)

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.20130

Amount of Each Receipt this Period
 100.00

Payroll Deduction (\$100, 2 weeks)

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

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20234

Amount of Each Receipt this Period
 100.00

Payroll Deduction (\$100, 2 weeks)

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

Mailing Address 8613 Highlands Drive

City Trussville State AL Zip Code 35173

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20338

Amount of Each Receipt this Period
 100.00

Payroll Deduction (\$100, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 73 OF 115
(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

A. Ed Mowen
 Full Name (Last, First, Middle Initial)
 Mailing Address 8613 Highlands Drive
 City Trussville State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20448
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100, 2 weeks)

B. Lori Munyan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1799 Slocum Avenue
 City Wall State NJ Zip Code 07719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20235
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

C. Lori Munyan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1799 Slocum Avenue
 City Wall State NJ Zip Code 07719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20339
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 115
	<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. Lori Munyan
Full Name (Last, First, Middle Initial)

Mailing Address 1799 Slocum Avenue

City Wall State NJ Zip Code 07719

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

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : **SA11AI.20449**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1831 28th Ave South Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : **SA11AI.20132**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 1831 28th Ave South Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : **SA11AI.20236**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40, 2 weeks)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1831 28th Ave South
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20340

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

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

Mailing Address 1831 28th Ave South
Suite 330

City Birmingham State AL Zip Code 35209

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

Name of Employer HealthSouth Corporation Occupation Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11AI.20450

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40, 2 weeks)

C. Patricia Ostaszewski
Full Name (Last, First, Middle Initial)

Mailing Address 54 Bay Way Drive

City Brick State NJ Zip Code 08723

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

Name of Employer HealthSouth Corporation Occupation Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 16 / 2014
Transaction ID : SA11AI.20133

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30, 2 weeks)

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 OF 115
(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

A. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Bay Way Drive
 City State Zip Code
 Brick NJ 08723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.20237
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

B. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Bay Way Drive
 City State Zip Code
 Brick NJ 08723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20341
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

C. Patricia Ostaszewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Bay Way Drive
 City State Zip Code
 Brick NJ 08723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSouth Corporation Hospital CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 690.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20451
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction (\$30, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 115
	<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. Dawn S. Pearson		Date of Receipt 10 / 16 / 2014 Transaction ID : SA11AI.20134
Mailing Address 22 Linda Lane		Amount of Each Receipt this Period 20.00
City Egg Harbor Township	State NJ	Zip Code 08234
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Human Resources Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Dawn S. Pearson		Date of Receipt 10 / 28 / 2014 Transaction ID : SA11AI.20238
Mailing Address 22 Linda Lane		Amount of Each Receipt this Period 20.00
City Egg Harbor Township	State NJ	Zip Code 08234
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Human Resources Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Dawn S. Pearson		Date of Receipt 11 / 01 / 2014 Transaction ID : SA11AI.20342
Mailing Address 22 Linda Lane		Amount of Each Receipt this Period 20.00
City Egg Harbor Township	State NJ	Zip Code 08234
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Human Resources Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 115
<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. Dawn S. Pearson		Date of Receipt MM / DD / YYYY 11 / 21 / 2014 Transaction ID : SA11AI.20452
Mailing Address 22 Linda Lane		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Egg Harbor Township	State NJ	Zip Code 08234
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Human Resources Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. Gretchin G. Pecher		Date of Receipt MM / DD / YYYY 10 / 16 / 2014 Transaction ID : SA11AI.20135
Mailing Address 9502 Pettswood Dr		Amount of Each Receipt this Period 15.00 Payroll Deduction (\$15, 2 weeks)
City Huntington Beach	State CA	Zip Code 92646
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Director of Therapy Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Gretchin G. Pecher		Date of Receipt MM / DD / YYYY 10 / 28 / 2014 Transaction ID : SA11AI.20239
Mailing Address 9502 Pettswood Dr		Amount of Each Receipt this Period 15.00 Payroll Deduction (\$15, 2 weeks)
City Huntington Beach	State CA	Zip Code 92646
FEC ID number of contributing federal political committee. C	Name of Employer HealthSouth Corporation	Occupation Director of Therapy Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Gretchin G. Pecher
Full Name (Last, First, Middle Initial)

Mailing Address 9502 Pettswood Dr

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20343

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. Gretchin G. Pecher
Full Name (Last, First, Middle Initial)

Mailing Address 9502 Pettswood Dr

City Huntington Beach State CA Zip Code 92646

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

Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20453

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. Doni Y. Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 5816 Winchester

City Texarkana State TX Zip Code 75503

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

Name of Employer Healthsouth Corporation Occupation Director of Marketing

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
 10 / 28 / 2014
Transaction ID : SA11AI.20241

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 115
<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. Doni Y. Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 5816 Winchester

City Texarkana	State TX	Zip Code 75503
-------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Director of Marketing
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20345

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Doni Y. Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 5816 Winchester

City Texarkana	State TX	Zip Code 75503
-------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Director of Marketing
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20455

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Donna M. Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 2518 Belmont Terrace #2A

City Fredericksburg	State VA	Zip Code 22401
------------------------	-------------	-------------------

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

Name of Employer HealhtSouth Corporation	Occupation Healthcare Facility Administrator
---	---

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
10	/	28	/	2014

Transaction ID : SA11AI.20242

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 115
	<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. Donna M. Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 2518 Belmont Terrace #2A
City Fredericksburg State VA Zip Code 22401

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

Name of Employer: HealthSouth Corporation
Occupation: Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: 11 / 01 / 2014
Transaction ID : SA11AI.20346

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 2 weeks)

B. Donna M. Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 2518 Belmont Terrace #2A
City Fredericksburg State VA Zip Code 22401

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

Name of Employer: HealthSouth Corporation
Occupation: Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: 11 / 21 / 2014
Transaction ID : SA11AI.20456

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 2 weeks)

C. Troy Powell
Full Name (Last, First, Middle Initial)

Mailing Address 103 History Lane
City Summerville State SC Zip Code 29485

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

Name of Employer: Healthsouth Corporation
Occupation: Hospital CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: 10 / 28 / 2014
Transaction ID : SA11AI.20243

Amount of Each Receipt this Period: **10.00**

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 115
	<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. Troy Powell
Full Name (Last, First, Middle Initial)
Mailing Address 103 History Lane

City Summerville	State SC	Zip Code 29485
---------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20347

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$10, 2 weeks)

B. Troy Powell
Full Name (Last, First, Middle Initial)
Mailing Address 103 History Lane

City Summerville	State SC	Zip Code 29485
---------------------	-------------	-------------------

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

Name of Employer Healthsouth Corporation	Occupation Hospital CEO
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20457

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$10, 2 weeks)

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

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

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

Name of Employer HealthSouth Corporation	Occupation National Director Talent Acquisition
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20140

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20244

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20348

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 1379 East Island Place

City Memphis State TN Zip Code 38103

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

Name of Employer HealthSouth Corporation Occupation National Director Talent Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20458

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
10 / 16 / 2014
Transaction ID : SA11AI.20141

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1680.00**

Date of Receipt
10 / 28 / 2014
Transaction ID : SA11AI.20245

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 381 Greystone Glen Circle

City	State	Zip Code
Birmingham	AL	35242

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1760.00**

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20349

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$80, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 381 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1840.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20459

Amount of Each Receipt this Period **80.00**

Payroll Deduction (\$80, 2 weeks)

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

Mailing Address 16654 West Moreland Street

City Goodyear State AZ Zip Code 85338

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

Name of Employer HealthSouth Corporation Occupation Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20142

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 16654 West Moreland Street

City Goodyear State AZ Zip Code 85338

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

Name of Employer HealthSouth Corporation Occupation Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20246

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 115
	<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	<input type="checkbox"/> 17

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

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

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20350

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 16654 West Moreland Street

City	State	Zip Code
Goodyear	AZ	85338

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

Name of Employer	Occupation
HealthSouth Corporation	Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20460

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. Steve Santel
Full Name (Last, First, Middle Initial)

Mailing Address 12005 Wesford Drive

City	State	Zip Code
Maryland Heights	MO	63043

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Managed Care

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
10	/	28	/	2014

Transaction ID : SA11AI.20248

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 115
	<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. Steve Santel
Full Name (Last, First, Middle Initial)

Mailing Address 12005 Wesford Drive

City Maryland Heights State MO Zip Code 63043

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

Name of Employer HealthSouth Corporation Occupation Director of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : SA11AI.20352

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Steve Santel
Full Name (Last, First, Middle Initial)

Mailing Address 12005 Wesford Drive

City Maryland Heights State MO Zip Code 63043

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

Name of Employer HealthSouth Corporation Occupation Director of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.20462

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 1827 Sentry Oak Court

City Orange Park State FL Zip Code 32003

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

Name of Employer HealthSouth Corporation Occupation Regional Chief Nursing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.20145

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 115
<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. Kathleen A. Shafer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 Transaction ID : SA11AI.20249
Mailing Address 1827 Sentry Oak Court		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Orange Park	State FL	Zip Code 32003
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Regional Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Kathleen A. Shafer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014 Transaction ID : SA11AI.20353
Mailing Address 1827 Sentry Oak Court		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Orange Park	State FL	Zip Code 32003
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Regional Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Kathleen A. Shafer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.20464
Mailing Address 1827 Sentry Oak Court		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20, 2 weeks)
City Orange Park	State FL	Zip Code 32003
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth Corporation	Occupation Regional Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 115
	<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. Michele M Skripps		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address 204 Lyttleton Way		Transaction ID : SA11AI.20147
City Anderson	State SC	Zip Code 29621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer HealthSouth Corporation	Occupation Hospital CEO	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Michele M Skripps		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 204 Lyttleton Way		Transaction ID : SA11AI.20251
City Anderson	State SC	Zip Code 29621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer HealthSouth Corporation	Occupation Hospital CEO	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Michele M Skripps		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014
Mailing Address 204 Lyttleton Way		Transaction ID : SA11AI.20355
City Anderson	State SC	Zip Code 29621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer HealthSouth Corporation	Occupation Hospital CEO	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 115
	<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. Michele M Skripps
Full Name (Last, First, Middle Initial)
Mailing Address 204 Lyttleton Way
City Anderson State SC Zip Code 29621
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Hospital CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20468
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

B. Lisa Smith
Full Name (Last, First, Middle Initial)
Mailing Address 127 Conroy Road
City Sterret State AL Zip Code 35147
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Internal Audit
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20252
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

C. Lisa Smith
Full Name (Last, First, Middle Initial)
Mailing Address 127 Conroy Road
City Sterret State AL Zip Code 35147
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Internal Audit
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20356
Amount of Each Receipt this Period **10.00**
Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **40.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 115
	<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. Lisa Smith
Full Name (Last, First, Middle Initial)
Mailing Address 127 Conroy Road
City Sterret State AL Zip Code 35147
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Internal Audit
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 21 / 2014
Transaction ID : SA11AI.20469
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10, 2 weeks)

B. Walter Smith
Full Name (Last, First, Middle Initial)
Mailing Address 728 Ridge Way Circle
City Birmingham State AL Zip Code 35226
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2014
Transaction ID : SA11AI.20149
Amount of Each Receipt this Period 15.00
Payroll Deduction (\$15, 2 weeks)

C. Walter Smith
Full Name (Last, First, Middle Initial)
Mailing Address 728 Ridge Way Circle
City Birmingham State AL Zip Code 35226
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 28 / 2014
Transaction ID : SA11AI.20253
Amount of Each Receipt this Period 15.00
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 115
	<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. Walter Smith
Full Name (Last, First, Middle Initial)

Mailing Address 728 Ridge Way Circle

City	State	Zip Code
Birmingham	AL	35226

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20357

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

B. Walter Smith
Full Name (Last, First, Middle Initial)

Mailing Address 728 Ridge Way Circle

City	State	Zip Code
Birmingham	AL	35226

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20470

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. Karen Spencer
Full Name (Last, First, Middle Initial)

Mailing Address 2520 Oakleaf Circle

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Director Tax Operations & Accounting

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
10	/	28	/	2014

Transaction ID : SA11AI.20254

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 93 OF 115
<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. Karen Spencer
Full Name (Last, First, Middle Initial)
Mailing Address 2520 Oakleaf Circle

City Bessemer	State AL	Zip Code 35022
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Director Tax Operations & Accounting
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20358

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Karen Spencer
Full Name (Last, First, Middle Initial)
Mailing Address 2520 Oakleaf Circle

City Bessemer	State AL	Zip Code 35022
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Director Tax Operations & Accounting
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20471

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

C. Darla Summerville
Full Name (Last, First, Middle Initial)
Mailing Address 219 Piper Street

City Lilly	State PA	Zip Code 15938
---------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation Director of Case Management
---------------------------------	---

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
10	/	28	/	2014

Transaction ID : SA11AI.20255

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 115
	<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. Darla Summerville
Full Name (Last, First, Middle Initial)
Mailing Address 219 Piper Street

City Lilly	State PA	Zip Code 15938
---------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation Director of Case Management
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20359

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

B. Darla Summerville
Full Name (Last, First, Middle Initial)
Mailing Address 219 Piper Street

City Lilly	State PA	Zip Code 15938
---------------	-------------	-------------------

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

Name of Employer HealthSouth	Occupation Director of Case Management
---------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20472

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10, 2 weeks)

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

City Birmingham	State AL	Zip Code 35242
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20152

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 95 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Dean Taggart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014 Transaction ID : SA11AI.20256
Mailing Address 704 Guardbridge Court		Amount of Each Receipt this Period 15.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation VP Internal Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Dean Taggart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2014 Transaction ID : SA11AI.20360
Mailing Address 704 Guardbridge Court		Amount of Each Receipt this Period 15.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation VP Internal Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) C. Dean Taggart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.20473
Mailing Address 704 Guardbridge Court		Amount of Each Receipt this Period 15.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15, 2 weeks)	
Name of Employer HealthSouth Corporation	Occupation VP Internal Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark J Tarr		Date of Receipt MM / DD / YYYY 10 / 16 / 2014 Transaction ID : SA11AI.20153
Mailing Address 1039 Williams Trace		Amount of Each Receipt this Period 115.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$115, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) B. Mark J Tarr		Date of Receipt MM / DD / YYYY 10 / 28 / 2014 Transaction ID : SA11AI.20257
Mailing Address 1039 Williams Trace		Amount of Each Receipt this Period 115.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$115, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2415.00	

Full Name (Last, First, Middle Initial) C. Mark J Tarr		Date of Receipt MM / DD / YYYY 11 / 01 / 2014 Transaction ID : SA11AI.20361
Mailing Address 1039 Williams Trace		Amount of Each Receipt this Period 115.00
City Birmingham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$115, 2 weeks)
Name of Employer HealthSouth Corporation	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2530.00	

SUBTOTAL of Receipts This Page (optional).....▶	345.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 115
	<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. Mark J Tarr

Mailing Address 1039 Williams Trace

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2645.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20474

Amount of Each Receipt this Period **115.00**

Payroll Deduction (\$115, 2 weeks)

Full Name (Last, First, Middle Initial)
B. Sheila Terry

Mailing Address 177 Wisteria Dr.

City Chelsea State AL Zip Code 35043

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20154

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

Full Name (Last, First, Middle Initial)
c. Sheila Terry

Mailing Address 177 Wisteria Dr.

City Chelsea State AL Zip Code 35043

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

Name of Employer HealthSouth Corporation Occupation Regional Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20258

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **145.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 115
	<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. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20362
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

B. Sheila Terry
Full Name (Last, First, Middle Initial)
Mailing Address 177 Wisteria Dr.
City Chelsea State AL Zip Code 35043
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Regional Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **345.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20475
Amount of Each Receipt this Period **15.00**
Payroll Deduction (\$15, 2 weeks)

C. Curtis H. Traylor
Full Name (Last, First, Middle Initial)
Mailing Address 3307 Waters Edge
City Manvel State TX Zip Code 77578
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Pharmacy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : SA11AI.20156
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20260

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20364

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

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

Mailing Address 3307 Waters Edge

City Manvel State TX Zip Code 77578

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

Name of Employer HealthSouth Corporation Occupation Director of Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20477

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶ **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 115
	<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. Michael G. Treadway
Full Name (Last, First, Middle Initial)

Mailing Address 109 West Hoskins Street

City New Boston State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20157

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 109 West Hoskins Street

City New Boston State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20261

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

Mailing Address 109 West Hoskins Street

City New Boston State TX Zip Code 75570

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

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20365

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 115
	<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. Michael G. Treadway
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 West Hoskins Street
 City New Boston State TX Zip Code 75570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Healthcare Facility Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20478
 Amount of Each Receipt this Period **15.00**
 Payroll Deduction (\$15, 2 weeks)

B. Enrique Alberto Vicens-Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1992
 City Guaynabo State PR Zip Code 00970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : SA11AI.20158
 Amount of Each Receipt this Period **19.00**
 Payroll Deduction (\$19, 2 weeks)

C. Enrique Alberto Vicens-Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1992
 City Guaynabo State PR Zip Code 00970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **399.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : SA11AI.20262
 Amount of Each Receipt this Period **19.00**
 Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	53.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Enrique Alberto Vicens-Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1992
 City Guaynabo State PR Zip Code 00970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **418.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : SA11AI.20366
 Amount of Each Receipt this Period **19.00**
 Payroll Deduction (\$19, 2 weeks)

B. Enrique Alberto Vicens-Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1992
 City Guaynabo State PR Zip Code 00970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Hospital Administration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **437.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11AI.20479
 Amount of Each Receipt this Period **19.00**
 Payroll Deduction (\$19, 2 weeks)

C. Andrew Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 27th Street South #1004
 City Birmingham State AL Zip Code 35205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP Development
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **570.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : SA11AI.20159
 Amount of Each Receipt this Period **28.50**
 Payroll Deduction (\$28.50, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 115
	<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. Andrew Ward
Full Name (Last, First, Middle Initial)

Mailing Address 1100 27th Street South
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
598.50

Date of Receipt
10 / 28 / 2014
Transaction ID : SA11AI.20263

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

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

Mailing Address 1100 27th Street South
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt
11 / 01 / 2014
Transaction ID : SA11AI.20367

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

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

Mailing Address 1100 27th Street South
#1004

City Birmingham State AL Zip Code 35205

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

Name of Employer HealthSouth Corporation Occupation VP Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.50

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11AI.20480

Amount of Each Receipt this Period
28.50

Payroll Deduction (\$28.50, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 115
	<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. Tricia A. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 2660 Piedmont Dr

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20265

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

B. Tricia A. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 2660 Piedmont Dr

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20369

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

C. Tricia A. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 2660 Piedmont Dr

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20482

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 115
<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. John Whittington
Full Name (Last, First, Middle Initial)

Mailing Address 2716 Watkins Glen Drive

City Birmingham	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation General Counsel
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3552.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20162

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation General Counsel
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3730.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20266

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 2 weeks)

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer HealthSouth Corporation	Occupation General Counsel
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3907.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20370

Amount of Each Receipt this Period
177.63

Payroll Deduction (\$177.63, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	532.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 115
	<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	<input type="checkbox"/> 17

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

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

Mailing Address 2716 Watkins Glen Drive

City Birmingham State AL Zip Code 35216

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

Name of Employer HealthSouth Corporation Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4085.49**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20483

Amount of Each Receipt this Period **177.63**

Payroll Deduction (\$177.63, 2 weeks)

B. Linda Masone Wilder
Full Name (Last, First, Middle Initial)

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20163

Amount of Each Receipt this Period **70.00**

Payroll Deduction (\$70, 2 weeks)

C. Linda Masone Wilder
Full Name (Last, First, Middle Initial)

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation Regional President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1470.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20267

Amount of Each Receipt this Period **70.00**

Payroll Deduction (\$70, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	317.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt 11 / 01 / 2014
Transaction ID : SA11AI.20371
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

B. Linda Masone Wilder
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1610.00

Date of Receipt 11 / 21 / 2014
Transaction ID : SA11AI.20484
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$70, 2 weeks)

C. Donn G. Willey
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 Riverchase Trails
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation National Director Compensation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2014
Transaction ID : SA11AI.20164
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Donn G. Willey
Full Name (Last, First, Middle Initial)
Mailing Address 123 Riverchase Trails

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

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

Name of Employer HealthSouth Corporation	Occupation National Director Compensation
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20268

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

B. Donn G. Willey
Full Name (Last, First, Middle Initial)
Mailing Address 123 Riverchase Trails

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

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

Name of Employer HealthSouth Corporation	Occupation National Director Compensation
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20372

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

C. Donn G. Willey
Full Name (Last, First, Middle Initial)
Mailing Address 123 Riverchase Trails

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

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

Name of Employer HealthSouth Corporation	Occupation National Director Compensation
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20485

Amount of Each Receipt this Period

15.00

Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 115
<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. Arthur E Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5947 South Shades Crest Rd

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20165

Amount of Each Receipt this Period

76.92

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1615.32**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20269

Amount of Each Receipt this Period

76.92

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 5947 South Shades Crest Rd

City	State	Zip Code
Bessemer	AL	35022

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

Name of Employer	Occupation
HealthSouth Corporation	Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1692.24**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20373

Amount of Each Receipt this Period

76.92

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 115
	<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. Arthur E Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Corporation Occupation Chief Real Estate Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1769.16**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20486

Amount of Each Receipt this Period **76.92**

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 2016 Eagle Valley Drive

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **10 / 16 / 2014**

Transaction ID : SA11AI.20166

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

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

Mailing Address 2016 Eagle Valley Drive

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation VP of Managed Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20270

Amount of Each Receipt this Period **12.00**

Payroll Deduction (\$12, 2 weeks)

SUBTOTAL of Receipts This Page (optional)..... **100.92**

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 111 OF 115
(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

A. John Ryan Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 Eagle Valley Drive
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP of Managed Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 01 / 2014
Transaction ID : SA11AI.20374
 Amount of Each Receipt this Period 12.00
 Payroll Deduction (\$12, 2 weeks)

B. John Ryan Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 Eagle Valley Drive
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation VP of Managed Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 21 / 2014
Transaction ID : SA11AI.20487
 Amount of Each Receipt this Period 12.00
 Payroll Deduction (\$12, 2 weeks)

C. Robert M Wisner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Eagle Lake Circle
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation SVP Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2014
Transaction ID : SA11AI.20167
 Amount of Each Receipt this Period 25.00
 Payroll Deduction (\$25, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 28 / 2014**

Transaction ID : SA11AI.20271

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 01 / 2014**

Transaction ID : SA11AI.20375

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Corporation Occupation SVP Reimbursement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11AI.20488

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 115
	<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	<input type="checkbox"/> 17

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

A. William Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 656 Bluff Park Road

City Hoover	State AL	Zip Code 35226
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.20168

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

B. William Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 656 Bluff Park Road

City Hoover	State AL	Zip Code 35226
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.20272

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

C. William Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 656 Bluff Park Road

City Hoover	State AL	Zip Code 35226
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20376

Amount of Each Receipt this Period
15.00

Payroll Deduction (\$15, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Russell Yeager
Full Name (Last, First, Middle Initial)
Mailing Address 628 Springbank Terrace

City Birmingham	State AL	Zip Code 35242
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation	Occupation Chief Information Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.20377

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

B. Russell Yeager
Full Name (Last, First, Middle Initial)
Mailing Address 628 Springbank Terrace

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

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

Name of Employer HealthSouth Corporation	Occupation Chief Information Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **874.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.20491

Amount of Each Receipt this Period

38.00

Payroll Deduction (\$38, 2 weeks)

C.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....▶	76.00
TOTAL This Period (last page this line number only).....▶	9354.20