**FEC** 

FORM 3X

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

For Other Than An Authorized Committee

					Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typir over the lines.	ig, type	12FE4M5	
Select Medical Corpora	ation PAC				
ADDRESS (number and street)	4714 Gettysburg Road				
▼					
Check if different than previously reported. (ACC)	Mechanicsburg			PA	17055
2. FEC IDENTIFICATION NU		Y 🔺	S		ZIP CODE
C C00546119		<b>v</b>	IEW N) <b>OR</b>	AME (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report	20 (M2)	/lay 20 (M5)	Aug 2	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar	20 (M3)	un 20 (M6)	Sep 2	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4)	ul 20 (M7)	Oct 2	0 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day	Primary (12P	)	General (1	I2G) Runoff (12R)
October 15 Quarterly Report (Q3	Report for the:	Convention (	12C) X	Special (1	2S)
January 31 Year-End Report (YE		n on 05	D D / 21	2019	in the State of PA
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election	General (300	i)	Runoff (30	R) Special (30S)
Termination Report (TER)	Report for the:	n on	D = D /	Y Y Y Y Y	in the State of
5. Covering Period 01	01 / Y Y Y 2019	Y through	M M 05	/ D D / 01	Y Y Y Y 2019
I certify that I have examined this Type or Print Name of Treasurer	Walters, William, , ,	my knowledge and b	elief it is true	e, correct and	complete.
Signature of Treasurer	rs, William, , ,	[Electronically	Filed] Da	ate 05	/ D D / Y Y Y Y 09 / 2019
NOTE: Submission of false, errone	ous, or incomplete information	may subject the pers	on signing thi	is Report to the	
Office Use Only					FEC FORM 3X Rev. 05/2016

05/09/2019 15 : 27

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Ima	age# 201905099149656953			
Γ	FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS		Page <b>2</b>
V	Vrite or Type Committee Name			
S	Select Medical Corporation PAC			
R	Report Covering the Period: From:	01 / Y Y Y Y Y 01 01 2019	To:	05 01 Y Y Y Y Y 05 01 2019
		COLUMN A This Period		COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2019			136005.52
	(b) Cash on Hand at Beginning of Reporting Period	136005.52	]	
	(c) Total Receipts (from Line 19)	43502.08		43502.08
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	179507.60	1 0	179507.60
7.	Total Disbursements (from Line 31)	148500.00	] [	148500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31007.60	] [	31007.60
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	]	
10.	. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on		1	

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

Schedule C and/or Schedule D) .....

X

#### For further information contact:

0.00

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

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Page 3

# Select Medical Corporation PAC

Report Covering the Period: From: 01	/ D D / Y Y Y Y 01 2019	To: 05 01 2019
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	37001.36	27004.20
(i) Itemized (use Schedule A)	37001.38	37001.36
(ii) Unitemized	6500.72	6500.72
(iii) TOTAL (add	4	
Lines 11(a)(i) and (ii)	43502.08	43502.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	43502.08	43502.08
Totals to Line 33, page 5)	43002.00	
. Transfers From Affiliated/Other Party Committees	0.00	0.00
Tarty Committees		
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	-77	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	7- 7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
<ul> <li>Transfers from Non-Federal and Levin Funds</li> <li>(a) Non-Federal Account</li> </ul>		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	0.00	
(b) Lovin Funds (from Schodulo 45)	0.00	0.00
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
		4
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	43502.08	43502.08
12, 10, 17, 10, 10, 17, and 10(0)/	7 7 7	
. Total Federal Receipts		

I

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4			
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating Expenditures	0.00	0.00			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))►	0.00	0.00			
Transfers to Affiliated/Other Party Committees	0.00	0.00			
Contributions to Federal Candidates/Committees and Other Political Committees	148500.00	148500.00			
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00			
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made Refunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)	0.00	0.00			
<ul> <li>(d) Total Contribution Refunds</li> <li>(add Lines 28(a), (b), and (c))</li> </ul>	0.00	0.00			
Other Disbursements (Including Non-Federal Donations)	0.00	0.00			
Federal Election Activity (52 U.S.C. § 30101) (a) Allocated Federal Election Activity (from Schedule H6)	4				
(i) Federal Share	0.00	0.00			
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid</li></ul>	0.00	0.00			
Entirely With Federal Funds	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	148500.00	148500.00			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	148500.00	148500.00			

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FEC Form 3X (Rev. 05/2016)

#### III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

	-					
(subtract	Line	37	from	Line	36)	

	-7		-7	43502.08
				0.00
	-7		-7	49.
				43502.08
			-	
				0.00
	-7		-7-	
				0.00
	-7		-7	455
				0.00
	-7-		-7-	

					43502.08
		7		-7	
					0.00
		-7	1	-7	0.00
					43502.08
la de la compañía de	-	7		-7	10002.00
			1		0.00
1.00		-7	1	-7	
			1		0.00
		-7		-7	
			1		0.00
1.00		-7-		 -7-	

COLUMN B

Calendar Year-to-Date

#### Page 5

L

	-											
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)										
	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr.,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2851 SW 137 Court			01 / Y Y Y Y 01 25 2019								
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-45748           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)		upation (for Individual)	Memo Item								
	Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼		President Year-to-Date ▼ 230.78									
R	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr.,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2851 SW 137 Court			02 08 2019								
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-113406 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item								
	Receipt For:		Year-to-Date V	-								
	Primary General Other (specify) ▼		346.17									
с.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr., Mailing Address 2851 SW 137 Court	ial) or Full O	rganization Name	Date of Receipt								
	City Miami	State FL	Zip Code 33175	02 22 2019 Transaction ID : A2019-327775 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.56									
Γ				246.17								

SUBTOTAL of Receipts This Page (optional)	Ŀ	 	y	-	 9	54	0.17	
	Г							7
TOTAL This Period (last page this line number only)	L	 			 	 	-	

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SA11AI Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule: Transaction ID:

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         8         OF         108           (check only one)         Image: Check o					
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements mana and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	2							
Α.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr.,	tial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 2851 SW 137 Court	03 08 2019							
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-521957 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item					
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 576.95						
В.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr.,	tial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 2851 SW 137 Court	03 22 2019							
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-540448 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34						
с.	Full Name of Individual (Last, First, Middle Init Bencomo, Dionisio, , Mr.,	tial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 2851 SW 137 Court	04 / D D / Y Y Y Y 04 05 / 2019							
	City Miami	State FL	Zip Code 33175	Transaction ID : A2019-826030 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.39					
	Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify)	Vice	President Year-to-Date ▼ 807.73	Memo Item					
s	UBTOTAL of Receipts This Page (optional)			346.17					
Т	OTAL This Period (last page this line number	only)	••••••						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         9         OF         108           (check only one)         I1a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	:		
Α.	Full Name of Individual (Last, First, Middle Initi Bencomo, Dionisio, , Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 2851 SW 137 Court			04 19 2019
	City	State	Zip Code	Transaction ID : A2019-826593
	Miami	FL	33175	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) V	L	923.12	
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name	Date of Descript
в.	Bolcavage, Theodore, J, Mr., Mailing Address 207 Bryant St			Date of Receipt 01 25 2019
	City	State	Zip Code	Transaction ID : A2019-45771
	Mechanicsburg	PA	17050-4148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	L	230.78	
C.	Full Name of Individual (Last, First, Middle Initi Bolcavage, Theodore, J, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 207 Bryant St	1-		02 / D D / Y Y Y Y 02 08 2019
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-113389
	FEC ID number of contributing	_		Amount of Each Receipt this Period
	federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	
s	UBTOTAL of Receipts This Page (optional)			346.17
т	OTAL This Period (last page this line number o	nly)		

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         10         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	,		
Α.	Full Name of Individual (Last, First, Middle Initi Bolcavage, Theodore, J, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 207 Bryant St			02 / 22 / 2019
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-327758           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	
в.	Full Name of Individual (Last, First, Middle Initi Bolcavage, Theodore, J, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 207 Bryant St			03 08 2019
	City	State	Zip Code	Transaction ID : A2019-521940
	Mechanicsburg	PA	17050-4148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		576.95	
C.	Full Name of Individual (Last, First, Middle Initi Bolcavage, Theodore, J, Mr.,	al) or Full C	rganization Name	Date of Receipt
	Mailing Address 207 Bryant St	01-1-		03 / D D / Y Y Y Y 22 2019
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-540431
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
_	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34	
1				

SL	JBTOTAL of Receipts This Page (optional)	L		7	 	9	34	6.17	·
		г							
ТС	DTAL This Period (last page this line number only)	L	 	-	 		 	-	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       11       OF       108         (check only one)       *       11a       11b       11c       12         13       14       15       16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 207 Bryant St			04 05 2019
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-826013 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]
в.	Full Name of Individual (Last, First, Middle Initia Bolcavage, Theodore, J, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 207 Bryant St			04 / D D / Y Y Y Y Y 2019
	City Mechanicsburg	State PA	Zip Code 17050-4148	Transaction ID : A2019-826576 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]
	Full Name of Individual (Last, First, Middle Initia Bradley, Daniel, F, Mr.,	al) or Full C	Organization Name	Date of Receipt
•	Mailing Address 2261 Turk Road			01 / 25 / 2019
	City Doylestown	State PA	Zip Code 18901	Transaction ID : A2019-45740 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 384.62	]
s	UBTOTAL of Receipts This Page (optional)			423.09

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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         12         OF         108           (check only one)         I1a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mand a	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Initi Bradley, Daniel, F, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 2261 Turk Road			02 08 2019
	City	State	Zip Code	Transaction ID : A2019-113398
	Doylestown	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Select Medical Corporation	Pre	esident	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) V		576.93	
в.	Full Name of Individual (Last, First, Middle Initi Bradley, Daniel, F, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 2261 Turk Road			M M / D D / Y Y Y Y 02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327767
	Doylestown	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		769.24	
С.	Full Name of Individual (Last, First, Middle Initi Bradley, Daniel, F, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 2261 Turk Road			03 / D D / Y Y Y Y 03 / 08 / 2019
	City Doylestown	State PA	Zip Code 18901	Transaction ID : A2019-521949
	FEC ID number of contributing			Amount of Each Receipt this Period
	federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) sident	Memo Item
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		961.55	
s	UBTOTAL of Receipts This Page (optional)		•	576.93
Т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         13         OF         108           (check only one)         Image: Check
Any information copied from such Reports or for commercial purposes, other than us	and Statements maining the name and a	ay not be sold or used by any address of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Select Medical Corporation	PAC		
Full Name of Individual (Last, First, Mid A. Bradley, Daniel, F, Mr.,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2261 Turk Road			03 22 2019
City Doylestown	State PA	Zip Code 18901	Transaction ID : A2019-540440
FEC ID number of contributing federal political committee.	C	18901	Amount of Each Receipt this Period
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.86	
Full Name of Individual (Last, First, Mid B. Bradley, Daniel, F, Mr.,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2261 Turk Road	State	Zip Code	04 / D D / Y Y Y Y 04 05 2019
Doylestown	PA	18901	Transaction ID : A2019-826022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.17	
Full Name of Individual (Last, First, Mid C. Bradley, Daniel, F, Mr.,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2261 Turk Road	State	Zip Code	04 19 2019 Transaction ID : A2019-826585
Doylestown	PA	18901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify)	Pres	upation (for Individual) sident Year-to-Date ▼ 1538.48	Memo Item
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu			576.93

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         14         OF         108           (check only one)         11a         11b         11c         12           13         14         15         16         17
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions te to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	C		
Α.	Full Name of Individual (Last, First, Middle Ini Cannon, Matthew, D, ,	itial) or Full C	rganization Name	Date of Receipt
	Mailing Address 19073 Twilight Trl			01 25 2019
	City	State	Zip Code	Transaction ID : A2019-45766
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	
	Primary General	Aggregate	Year-to-Date ▼	-
	Other (specify) <b>v</b>	L	230.78	
B	Full Name of Individual (Last, First, Middle Ini Cannon, Matthew, D, ,	itial) or Full C	rganization Name	Date of Receipt
0.	Mailing Address 19073 Twilight Trl			02 08 2019
	City	State	Zip Code	02062019 Transaction ID : A2019-113384
	Eden Prairie	MN	55346-4047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		346.17	
с.	Full Name of Individual (Last, First, Middle Ini Cannon, Matthew, D, ,	tial) or Full C	rganization Name	Date of Receipt
	Mailing Address 19073 Twilight Trl			M M / D D / Y Y Y Y 02 22 2019
	City Eden Prairie	State MN	Zip Code 55346-4047	Transaction ID : A2019-327793
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.56	]
s	UBTOTAL of Receipts This Page (optional)			346.17
т	OTAL 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       15       OF       108         (check only one)       I1a       11b       11c       12         I1a       11b       11c       12         I3       14       15       16       17
	the name and a		person for the purpose of soliciting contributions be to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle A. Cannon, Matthew, D, , Mailing Address 19073 Twilight Trl City Eden Prairie FEC ID number of contributing federal political committee.	State MN	Zip Code 55346-4047	Date of Receipt 03 08 2019 Transaction ID : A2019-521935 Amount of Each Receipt this Period 115.39
Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼	Vice	upation (for Individual) e President Year-to-Date ▼ 576.95	
Full Name of Individual (Last, First, Middle B. Cannon, Matthew, D, , Mailing Address 19073 Twilight Trl	Initial) or Full C	Drganization Name	Date of Receipt 03 / 22 / 2019 Transaction ID : A2019-540465
Eden Prairie FEC ID number of contributing federal political committee. Name of Employer (for Individual)		55346-4047	Amount of Each Receipt this Period  115.39  Memo Item
Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼	Vic	e President Year-to-Date ▼ 692.34	
C. Full Name of Individual (Last, First, Middle Cannon, Matthew, D, , Mailing Address 19073 Twilight Trl	Initial) or Full C	Drganization Name	Date of Receipt
Eden Prairie FEC ID number of contributing federal political committee.		55346-4047	Transaction ID : A2019-826047         Amount of Each Receipt this Period         115.39
Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify)	Vice	upation (for Individual) President Year-to-Date ▼ 807.73	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         16         OF         108           (check only one)         I1a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using the second			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	NC		
Full Name of Individual (Last, First, Middle I A. Cannon, Matthew, D, ,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 19073 Twilight Trl			M M / D D / Y Y Y Y Y 04 19 2019
City Eden Prairie	State MN	Zip Code 55346-4047	Transaction ID : A2019-826571 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]
Full Name of Individual (Last, First, Middle I B. Chambers, Jason, S, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 1415 Aaron Creek Drive			01 25 2019
City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-45743 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78	]
Full Name of Individual (Last, First, Middle I C. Chambers, Jason, S, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 1415 Aaron Creek Drive			02 08 2019
City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-113401         Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	]
SUBTOTAL of Receipts This Page (optional)			346.17

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

FEC Schedule A (Form 3X) Rev. 06/2016

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       17       OF       108         (check only one)       ************************************
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	2		
A.	Full Name of Individual (Last, First, Middle Init Chambers, Jason, S, Mr.,	tial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1415 Aaron Creek Drive			02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327770
	Fisherville	KY	40023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	_
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) V		461.56	]
В.	Full Name of Individual (Last, First, Middle Init Chambers, Jason, S, Mr.,	tial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1415 Aaron Creek Drive			03 08 2019
	City	State	Zip Code	Transaction ID : A2019-521952
	Fisherville	KY	40023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary     General       Other (specify) ▼		576.95	]
<u> </u>	Full Name of Individual (Last, First, Middle Init Chambers, Jason, S, Mr.,	tial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1415 Aaron Creek Drive			03 / D D / Y Y Y Y 22 2019
	City Fisherville	State KY	Zip Code 40023	Transaction ID : A2019-540443
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34	]
s	UBTOTAL of Receipts This Page (optional)			346.17
Т	OTAL This Period (last page this line number of	only)	·····	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       18       OF       108         (check only one)       Image: Check only one in the image: Check only one in the image: Check on the
	y information copied from such Reports and S for commercial purposes, other than using the			13     14     15     16     17       erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Init Chambers, Jason, S, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 1415 Aaron Creek Drive			04 05 2019
	City	State	Zip Code	Transaction ID : A2019-826025
	Fisherville	KY	40023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		President	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) V	L	807.73	1
в.	Full Name of Individual (Last, First, Middle Init Chambers, Jason, S, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 1415 Aaron Creek Drive			M M / D D / Y Y Y Y 04 19 2019
	City	State	Zip Code	Transaction ID : A2019-826588
	Fisherville	KY	40023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		923.12	]
<u> </u>	Full Name of Individual (Last, First, Middle Init Chernow, David, S, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 700 Gladstone Court			01 25 2019
	City	State PA	Zip Code 17055	Transaction ID : A2019-45759
	Mechanicsburg FEC ID number of contributing	C	17055	Amount of Each Receipt this Period
	federal political committee.			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ident	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.62	1
$\vdash$	UBTOTAL of Receipts This Page (optional)			423.09

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing federal political committee.	name and a	ddress of any political committ	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	for each category of the Detailed Summary Page ay not be sold or used by any ddress of any political committ organization Name Zip Code	X       11a       11b       11c       12         13       14       15       16       17         person for the purpose of soliciting contributions ee to solicit contributions from such committee.       Date of Receipt       02         Date of Receipt       02       08       2019         Transaction ID : A2019-113377       10       10
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	ay not be sold or used by any ddress of any political committ organization Name Zip Code	13       14       15       16       17         person for the purpose of soliciting contributions ee to solicit contributions from such committee.         Date of Receipt         02       08       2019         Transaction ID : A2019-113377
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	rganization Name	Date of Receipt 02 Transaction ID : A2019-113377
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	rganization Name	Date of Receipt 02 / 08 / 2019 Transaction ID : A2019-113377
Select Medical Corporation PAC Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	Zip Code	M         M         /         D         D         /         Y
Full Name of Individual (Last, First, Middle Init A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	ial) or Full C	Zip Code	M         M         /         D         D         /         Y
A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	State PA	Zip Code	M         M         /         D         D         /         Y
A. Chernow, David, S, Mr., Mailing Address 700 Gladstone Court City Mechanicsburg FEC ID number of contributing	State PA	Zip Code	M         M         /         D         D         /         Y
City Mechanicsburg FEC ID number of contributing	PA		02 08 2019 Transaction ID : A2019-113377
Mechanicsburg FEC ID number of contributing	PA		
FEC ID number of contributing	_	17055	Amount of Each Receipt this Period
0	С		
			192.31
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Select Medical Corporation Receipt For:	-	sident	
Primary General	Aggregate	Year-to-Date ▼	
Other (specify) V		576.93	
Full Name of Individual (Last, First, Middle Init B. Chernow, David, S, Mr.,	ial) or Full C	rganization Name	Date of Receipt
Mailing Address 700 Gladstone Court			
			02 22 2019
City	State	Zip Code	Transaction ID : A2019-327786
Mechanicsburg	PA	17055	Amount of Each Receipt this Period
FEC ID number of contributing	С		192.31
federal political committee.			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			
Other (specify)		769.24	
Full Name of Individual (Last, First, Middle Init C. Chernow, David, S, Mr.,	ial) or Full C	rganization Name	Date of Receipt
Mailing Address 700 Gladstone Court			M M / D D / Y Y Y Y 03 08 2019
City	State	Zip Code	Transaction ID : A2019-521968
Mechanicsburg	PA	17055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident	Memo Item
Receipt For:		Year-to-Date V	
Primary General	Ayyreyale		
Other (specify)	L	961.55	
SUBTOTAL of Receipts This Page (optional)			576.93

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 20 OF 108 (check only one)
			ay not be sold or used by any	person for the purpose of soliciting contributions
	for commercial purposes, other than using the INAME OF COMMITTEE (In Full) Select Medical Corporation PAC		address of any pointical committe	
A.	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 700 Gladstone Court			M         M         /         D         /         Y
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-540458 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation Receipt For:	Pre	cupation (for Individual) esident	Memo Item
	Primary General Other (specify) ▼	Aggregate	P Year-to-Date ▼ 1153.86	
	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 700 Gladstone Court		M M / D D / Y Y Y Y 04 05 2019	
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-826040 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1346.17	]
	Full Name of Individual (Last, First, Middle Initia Chernow, David, S, Mr.,	al) or Full C	Drganization Name	Date of Receipt
	Mailing Address 700 Gladstone Court			04 / D D / Y Y Y Y 2019
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-826564 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify)	Pres	e year-to-Date ▼ 1538.48	Memo Item
s	UBTOTAL of Receipts This Page (optional)			576.93

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

FEC Schedule A (Form 3X) Rev. 06/2016

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 21 OF 108 (check only one)
			Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Deemer, Miriam, R, Mrs.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 285 Merriweather Rd			01 25 2019
	City Crosse Baista Forma	State MI	Zip Code	Transaction ID : A2019-45761
	Grosse Pointe Farms		48236-3428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For:			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78	
— B	Full Name of Individual (Last, First, Middle Initia Deemer, Miriam, R, Mrs.,	al) or Full C	Organization Name	Date of Receipt
5.	Mailing Address 285 Merriweather Rd		02 08 2019	
	City	State	Zip Code	Transaction ID : A2019-113379
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify) ▼		, 346.17	
С.	Full Name of Individual (Last, First, Middle Initia Deemer, Miriam, R, Mrs.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 285 Merriweather Rd			02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327788
	Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		115.39
			upation (for Individual)	Memo Item
	Select Medical Corporation		e President	_
	Receipt For: Primary General	Aggregate	Year-to-Date <b>V</b>	
	Other (specify)		461.56	
s	UBTOTAL of Receipts This Page (optional)			346.17

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

SCHEDULE A (FEC Form 3)	()		FOR LINE NUMBER: PAGE 22 OF
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
or for commercial purposes, other than using			person for the purpose of soliciting contributio ee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Select Medical Corporation F	PAC		
Full Name of Individual (Last, First, Middle) Deemer, Miriam, R, Mrs.,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 285 Merriweather Rd			03 / D D / Y Y Y Y Y 03 08 2019
City Grosse Pointe Farms	State MI	Zip Code 48236-3428	Transaction ID : A2019-521970           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.39
Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	
Full Name of Individual (Last, First, Middle <b>Deemer, Miriam, R, Mrs.</b> ,	e Initial) or Full C	Drganization Name	Date of Receipt
Mailing Address 285 Merriweather Rd			03 22 2019
City Grosse Pointe Farms	State MI	Zip Code 48236-3428	Transaction ID : A2019-540460 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	_

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Deemer, Miriam, R, Mrs., C.

Other (specify)

. Deemer, Miriam, R, Mrs.,	Date of Receipt		
Mailing Address 285 Merriweather Rd			04 05 2019
City	State	Zip Code	Transaction ID : A2019-826042
Grosse Pointe Farms	MI	48236-3428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual)	Occupat	tion (for Individual)	Memo Item
Select Medical Corporation	Vice Pre	, , , , , , , , , , , , , , , , , , ,	
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 807.73	
SUBTOTAL of Receipts This Page (optional	I)	• • • • • • • • • • • • • • • • • • •	346.17
TOTAL This Period (last page this line num	ber only)		

692.34

108

17

SCHEDULE A (FEC FO	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       23       OF       108         (check only one)
Any information copied from such or for commercial purposes, other	Reports and Statements mathematic and a the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Ful Select Medical Corpo			
A. Deemer, Miriam, R, Mrs., Mailing Address 285 Merriweath	•	rganization Name	Date of Receipt
City Grosse Pointe Farms	State MI	Zip Code 48236-3428	04     19     2019       Transaction ID : A2019-826566       Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer (for Individual Select Medical Corporation         Receipt For:         Primary       □         Other (specify) ▼	Vice	upation (for Individual) ⇒ President Year-to-Date ▼ 923.12	Memo Item
B. Full Name of Individual (Last, F DeGumbia, David, J, Mr. Mailing Address 383 Pattonwood	,	rganization Name	Date of Receipt
City Southington FEC ID number of contributing federal political committee.	State CT	Zip Code 06489	01         25         2019           Transaction ID : A2019-45756           Amount of Each Receipt this Period           115.39
Name of Employer (for Individual Select Medical Corporation	Ser	upation (for Individual) ior Vice President Year-to-Date ▼	Memo Item
Other (specify) ▼		230.78	]
C. DeGumbia, David, J, M Mailing Address 383 Pattonwoo	r.,	rganization Name	Date of Receipt
City Southington	State CT	Zip Code 06489	02     08     2019       Transaction ID : A2019-113374       Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.39
Name of Employer (for Individual Select Medical Corporation         Receipt For:         Primary       General         Other (specify)	Seni	upation (for Individual) ior Vice President Year-to-Date ▼ 346.17	Memo Item
SUBTOTAL of Receipts This Pag	e (optional)		346.17

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

Im	age# 201905099149656975							
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate sched for each category of Detailed Summary F	f the	FOR LINE NUMBER:       PAGE       24       OF       10         (check only one)       11a       11b       11c       12         13       14       15       16       11			
	ny information copied from such Reports and S for commercial purposes, other than using the				son for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA							
Α.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr.,	itial) or Full C	organization Name		Date of Receipt			
	Mailing Address 383 Pattonwood Dr				02 22 2019			
	City Southington	State CT	Zip Code 06489		Transaction ID : A2019-327783 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			115.39	1		
	Name of Employer (for Individual)		upation (for Individual)		Memo Item			
	Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼		ior Vice President Year-to-Date ▼ 46	i1.56				
В.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr., Mailing Address 383 Pattonwood Dr				Date of Receipt			
	City Southington	State CT	Zip Code 06489		Transaction ID : A2019-521965 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			115.39	]		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President		Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 57	76.95				
C.	Full Name of Individual (Last, First, Middle In DeGumbia, David, J, Mr., Mailing Address 383 Pattonwood Dr	itial) or Full C	rganization Name		Date of Receipt			
					03 22 2019			
	City Southington	State CT	Zip Code 06489		Transaction ID : A2019-540455 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			115.39			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President		Memo Item			
Boogint For:			Year-to-Date ▼ 69	92.34				

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       25       OF       108         (check only one)       I1a       11b       11c       12         I1a       11b       11c       12       16       17			
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC						
Α.	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	al) or Full C	organization Name	Date of Receipt			
	Mailing Address 383 Pattonwood Dr			04 / D D / Y Y Y Y 04 05 2019			
	City	State	Zip Code	Transaction ID : A2019-826037			
	Southington	СТ	06489	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Select Medical Corporation		ior Vice President				
	Receipt For:						
	Primary General	Aggregate	Year-to-Date ▼				
	Other (specify) V		807.73	]			
в.	Full Name of Individual (Last, First, Middle Initia DeGumbia, David, J, Mr.,	al) or Full C	organization Name	Date of Receipt			
	Mailing Address 383 Pattonwood Dr			04 19 2019			
	City	State	Zip Code	Transaction ID : A2019-826600			
	Southington	СТ	06489	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]			
<u> </u>	Full Name of Individual (Last, First, Middle Initia Dishner, Kerry, R, ,	al) or Full C	Prganization Name	Date of Receipt			
	Mailing Address 202 Downing PI Suite 1050			01 25 2019			
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-45760 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item			
	Receipt For:	Anareaste	Year-to-Date ▼				
	Primary General Other (specify)		230.78	]			
s	UBTOTAL of Receipts This Page (optional)			346.17			

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 26 OF

			Use separate schedule(s)	(ch	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	3	<b>′</b> 11a 13		11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose o	f soliciting	g contribu	tions
$\overline{\ }$	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
/	Select Medical Corporation FAC									
A.	Full Name of Individual (Last, First, Middle Initia Dishner, Kerry, R, ,	l) or Full Oi	rganization Name		Date of	Re	eceipt			
	Mailing Address 202 Downing Pl Suite 1050				м м 02	/	08		2019	Y
	City Mechanicsburg	State PA	Zip Code 17050-6881					: <b>A2019-1</b> Receipt th		_
	FEC ID number of contributing federal political committee.	С							115.	39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President		Me	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17	]						
в.	Full Name of Individual (Last, First, Middle Initia Dishner, Kerry, R, ,	l) or Full Oi	rganization Name		Date of	Re	eceipt			
	Mailing Address 202 Downing Pl Suite 1050				M M 02	/	22		2019	Y
	City Mechanicsburg	State PA	Zip Code 17050-6881	-			-	A2019-3		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Vice President			Amount	U		Receipt th	115.	39
	Name of Employer (for Individual) Select Medical Corporation				Me	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	]						
С.	Full Name of Individual (Last, First, Middle Initia Dishner, Kerry, R, ,	l) or Full Oi	rganization Name		Date of	Re	eceipt			
	Mailing Address 202 Downing PI Suite 1050				03	/	D 08		2019	Y
	City Mechanicsburg	State PA	Zip Code 17050-6881					: A2019-5 Receipt th		
	FEC ID number of contributing federal political committee.	С			Ē		y 1	5	115.	39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President		Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.95	]						
s	UBTOTAL of Receipts This Page (optional)			•					346.	17
т	OTAL This Period (last page this line number on	ly)		•	<b>_</b>		- 	,		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 27 OF 108 (check only one)			
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	y information copied from such Reports and Sta for commercial purposes, other than using the			e to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC						
Α.	Full Name of Individual (Last, First, Middle Initi Dishner, Kerry, R, ,	al) or Full C	Organization Name	Date of Receipt			
	Mailing Address 202 Downing Pl Suite 1050			M M / D D / Y Y Y Y Y 03 22 2019			
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-540459 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]			
В.	Full Name of Individual (Last, First, Middle Initi Dishner, Kerry, R, ,	al) or Full C	Organization Name	Date of Receipt			
υ.	Mailing Address 202 Downing Pl Suite 1050			04 05 2019			
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-826041 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С	115.39				
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]			
<u> </u>	Full Name of Individual (Last, First, Middle Initi Dishner, Kerry, R, ,	al) or Full C	Organization Name	Date of Receipt			
	Mailing Address 202 Downing Pl Suite 1050	04 / D D / Y Y Y Y 04 19 2019					
	City Mechanicsburg	State PA	Zip Code 17050-6881	Transaction ID : A2019-826565 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		115.39			
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	]			
s	UBTOTAL of Receipts This Page (optional)			346.17			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       28       OF       108         (check only one)       Image: state st			
Any information copied from such Reports and Sta or for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;					
Full Name of Individual (Last, First, Middle Initia A. Duggan, John, F, Mr.,	al) or Full C	rganization Name	Date of Receipt			
Mailing Address 1764 North Meadow Drive			03 / D D / Y Y Y Y 03 18 2019			
City	State PA	Zip Code 17055	Transaction ID : A2019-530230			
Mechanicsburg	FA	17055	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		5000.00			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item			
Receipt For:		Year-to-Date ▼	-			
Primary General Other (specify) ▼		5000.00				
Full Name of Individual (Last, First, Middle Initia B. Farley, Kyle, L, Mr.,	al) or Full C	rganization Name	Date of Receipt			
Mailing Address 13316 E 93rd St	03 22 2019					
City Kansas City	State MO	Zip Code 64138-5000	Transaction ID : A2019-540454 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		38.47			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.82				
Full Name of Individual (Last, First, Middle Initia C. Farley, Kyle, L, Mr.,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Farley, Kyle, L. Mr.,					
Mailing Address 13316 E 93rd St			04 / D D / Y Y Y Y 05 / 2019			
City Kansas City	State MO	Zip Code 64138-5000	Transaction ID : A2019-826036 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		38.47			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item			
Receipt For:		Year-to-Date V				
Primary General Other (specify)	Aggregate	269.29				
SUBTOTAL of Receipts This Page (optional)			5076.94			

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         29         OF         108           (check only one)         Image: Check only one in the image: Check only one in the image: Check on in the i
Ar or	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
$\backslash$	Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initi Farley, Kyle, L, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 13316 E 93rd St			04 19 2019
	City	State	Zip Code	Transaction ID : A2019-826599
	Kansas City	MO	64138-5000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	
	Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) <b>v</b>		307.76	1
— R	Full Name of Individual (Last, First, Middle Initi Hammerman, Samuel, I, Doctor, I.	Date of Receipt		
υ.	Mailing Address 6 Windy Drive	01 25 2019		
	City	State	Zip Code	Transaction ID : A2019-45763
	Shavertown	PA	18708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify) ▼		, 384.62	
<u>с.</u>	Full Name of Individual (Last, First, Middle Initi Hammerman, Samuel, I, Doctor, I.	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 6 Windy Drive	02 08 2019		
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-113381
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.93	
s	UBTOTAL of Receipts This Page (optional)			423.09
Т	OTAL This Period (last page this line number o	only)	••••••	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 30 OF 108           (check only one)         11a           X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 6 Windy Drive	02 / D D / Y Y Y Y Y Y 22 2019		
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-327790           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼	Chi	upation (for Individual) ef Medical Officer Year-to-Date ▼ 769.24	Memo Item
В.	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 6 Windy Drive	03 / D D / Y Y Y Y 03 08 2019		
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-521932 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	192.31		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.55	]
с.	Full Name of Individual (Last, First, Middle Initia Hammerman, Samuel, I, Doctor, I.	Date of Receipt		
	Mailing Address 6 Windy Drive	03 / D / Y Y Y Y 22 / 2019		
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-540462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) of Medical Officer	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.86	]
s	UBTOTAL of Receipts This Page (optional)			576.93

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

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 OF 108 (check only one)					
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	<b>X</b> 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) Select Medical Corporation PAC	)							
<u> </u>	Full Name of Individual (Last, First, Middle Init Hammerman, Samuel, I, Doctor, I.	ial) or Full C	Organization Name	Date of Receipt					
	Mailing Address 6 Windy Drive			04 05 2019					
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-826044 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		192.31					
	Name of Employer (for Individual)		upation (for Individual)	Memo Item					
	Select Medical Corporation           Receipt For:           Primary   General		ef Medical Officer Year-to-Date ▼	_					
	Other (specify) <b>v</b>	L	1346.17						
в.	Hammerman, Samuel, I, Doctor, I.	II Name of Individual (Last, First, Middle Initial) or Full Organization Name ammerman, Samuel, I, Doctor, I.							
	Mailing Address 6 Windy Drive	04 / D D / Y Y Y Y 2019							
	City Shavertown	State PA	Zip Code 18708	Transaction ID : A2019-826568 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		192.31					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ef Medical Officer	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1538.48						
<u> </u>	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	Date of Receipt							
	Mailing Address 116 Ellesmere Lane	01 / Y Y Y Y 25 / 2019							
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-45770 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		192.31					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) cutive Vice President	Memo Item					
	Receipt For: Primary General Other (specify)								
s	UBTOTAL of Receipts This Page (optional)		•	576.93					
Т	OTAL This Period (last page this line number of	only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         32         OF         108           (check only one)
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any paddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)		
Α.	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 116 Ellesmere Lane	02 08 2019		
	City	State	Zip Code	Transaction ID : A2019-113388
	Mechanicsburg	PA	17055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		ecutive Vice President	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.93	
В.	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 116 Ellesmere Lane	02 22 2019		
	City	State	Zip Code	Transaction ID : A2019-327757
	Mechanicsburg	PA	17055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ecutive Vice President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		769.24	
— c.	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	Date of Receipt		
	Mailing Address 116 Ellesmere Lane	03 08 2019		
	City Mechanicsburg	State PA	Zip Code 17055	Transaction ID : A2019-521939
	FEC ID number of contributing	C	17055	Amount of Each Receipt this Period
	federal political committee.	U		
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) cutive Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 961.55	
s	UBTOTAL of Receipts This Page (optional)			576.93
	OTAL This Period (last page this line number of			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		fc D	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 33 OF 108         (check only one)       11a         11a       11b       11c       12         13       14       15       16       17
Ar or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ay no addre	ot be sold or used by any p ess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	Select Medical Corporation PAC				
Α.	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	ial) or Full C	Organ	nization Name	Date of Receipt
	Mailing Address 116 Ellesmere Lane	M M / D D / Y Y Y Y 03 22 2019			
	City	State		Zip Code	Transaction ID : A2019-540430
	Mechanicsburg	PA	_	17055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			192.31
	Name of Employer (for Individual)		•	ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:			ve Vice President r-to-Date ▼	_
	Primary General Other (specify) ▼		-	1153.86	
	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	ial) or Full C	Organ	nization Name	Date of Receipt
ь.	Mailing Address 116 Ellesmere Lane				04 05 2019
	City	State		Zip Code	Transaction ID : A2019-826012
	Mechanicsburg FEC ID number of contributing	PA	_	17055	Amount of Each Receipt this Period
	federal political committee.	C			192.31
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) ve Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ , 1346.17	
<u> </u>	Full Name of Individual (Last, First, Middle Init Jackson, Martin, F, Mr.,	ial) or Full C	Drgan	nization Name	Date of Receipt
•.	Mailing Address 116 Ellesmere Lane	04 19 2019			
	City Mechanicsburg	State PA		Zip Code 17055	Transaction ID : A2019-826575 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			192.31
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) e Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year	r-to-Date ▼ 1538.48	
s	UBTOTAL of Receipts This Page (optional)				576.93
т	OTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 OF 108 (check only one)
11			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)		
Α.	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 740 Parkins Mill Rd.			01 25 2019
	City	State SC	Zip Code	Transaction ID : A2019-45758
	Greenville	SC	29607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President Year-to-Date ▼	-
	Primary General	Aggregate		
	Other (specify) <b>v</b>		230.78	
	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	ial) or Full C	Organization Name	Date of Receipt
ь.	Mailing Address 740 Parkins Mill Rd.			
	City	02 08 2019		
	Greenville	State SC	Zip Code 29607	Transaction ID : A2019-113376 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		e President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		, 346.17	
с.	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	Date of Receipt		
	Mailing Address 740 Parkins Mill Rd.			M M / D D / Y Y Y Y Y 02 22 2019
	City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-327785
	FEC ID number of contributing		23007	Amount of Each Receipt this Period
	federal political committee.	C		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		461.56	
s	UBTOTAL of Receipts This Page (optional)			346.17
	OTAL This Period (last page this line number of			

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 35 OF 108 (check only one)
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)		
Α.	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 740 Parkins Mill Rd.			03 08 2019
	City	State	Zip Code	Transaction ID : A2019-521967
	Greenville	SC	29607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) <b>v</b>	L	576.95	
R	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	ial) or Full C	Organization Name	Date of Receipt
Ъ.	Mailing Address 740 Parkins Mill Rd.	03 22 2019		
	City	State	Zip Code	Transaction ID : A2019-540457
	Greenville	SC	29607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		692,34	
<u> </u>	Full Name of Individual (Last, First, Middle Init James, Stephanie, R, Ms.,	Date of Receipt		
	Mailing Address 740 Parkins Mill Rd.			04 05 2019
	City Greenville	State SC	Zip Code 29607	Transaction ID : A2019-826039
	FEC ID number of contributing	00	29007	Amount of Each Receipt this Period
	federal political committee.	C		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For:	Aggregate	Year-to-Date <b>V</b>	
	Other (specify)		807.73	
s	UBTOTAL of Receipts This Page (optional)			346.17
T	OTAL This Period (last page this line number of	only)	•••••••	· · · · · · · · · · · · · · · · · · ·

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	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 36 OF 108           (check only one)         I1a           I1a         11b         11c         12           13         14         15         16         17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	IE OF COMMITTEE (In Full)			
	Name of Individual (Last, First, Middle Initia mes, Stephanie, R, Ms.,	al) or Full C	Organization Name	Date of Receipt
Mail	ing Address 740 Parkins Mill Rd.	04 19 2019		
City Gre	enville	State SC	Zip Code 29607	Transaction ID : A2019-826563 Amount of Each Receipt this Period
	D number of contributing bral political committee.	С		115.39
	ne of Employer (for Individual) ect Medical Corporation		upation (for Individual) e President	Memo Item
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]
	Name of Individual (Last, First, Middle Initia y, David, F, Mr.,	Date of Receipt		
	ing Address 1750 Eliza Way	02 08 / Y Y Y Y Y 02 08		
City Med	chanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-113405 Amount of Each Receipt this Period
	D number of contributing political committee.	С		76.93
Sele	ne of Employer (for Individual) ect Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.79	1
	Name of Individual (Last, First, Middle Initia ey, David, F, Mr.,	Date of Receipt		
	ing Address 1750 Eliza Way	02 / D D / Y Y Y Y 02 22 2019		
City Me	chanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-327774 Amount of Each Receipt this Period
	D number of contributing ral political committee.	С		76.93
Sele	ne of Employer (for Individual) ect Medical Corporation		upation (for Individual) ior Vice President	Memo Item
Rec	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 307.72	1
SUBT	OTAL of Receipts This Page (optional)			269.25

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         37         OF         108           (check only one)
Ar or	y information copied from such Reports and SI for commercial purposes, other than using the	atements ma name and a	hay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	Select Medical Corporation PAC	,		
Α.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way			03 08 2019
	City	State	Zip Code	Transaction ID : A2019-521956
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		nior Vice President	_
	Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	L	384.65	
в.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way	M M / D D / Y Y Y Y Y 03 22 2019		
	City	State PA	Zip Code	Transaction ID : A2019-540447
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) enior Vice President	Memo Item
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		461.58	
С.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 1750 Eliza Way			04 / D D / Y Y Y Y 04 05 2019
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-826029
	FEC ID number of contributing		11000	Amount of Each Receipt this Period
	federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Other (specify)		538.51	
s	UBTOTAL of Receipts This Page (optional)		••••••	230.79
Т	OTAL This Period (last page this line number of	only)	·····	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			fo	Jse separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         38         OF         108           (check only one)         I1a         11b         11c         12           I         13         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
Α.	Full Name of Individual (Last, First, Middle Init Key, David, F, Mr.,	al) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 1750 Eliza Way				04 19 2019
	City	State		Zip Code	Transaction ID : A2019-826592
	Mechanicsburg	PA		17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			76.93
	Name of Employer (for Individual)		•	ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		-	/ice President	
	Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 615.44	
В.	Full Name of Individual (Last, First, Middle Initi Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr		01 25 2019		
	City	State		Zip Code	Transaction ID : A2019-45772
	Harrisburg	PA	_	17112-1040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) /ice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ , 230.78	
с.	Full Name of Individual (Last, First, Middle Initi Kurmakov, Aleksey, N, Mr.,	al) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr				02 / D D / Y Y Y Y 02 08 2019
	City Harrisburg	State PA		Zip Code 17112-1040	Transaction ID : A2019-113390         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) ice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 346.17	
s	UBTOTAL of Receipts This Page (optional)				307.71
Т	OTAL This Period (last page this line number of	nly)			1 1 7 <sup>2</sup> 1 1 7 <sup>2</sup> 1 1 7 <sup>2</sup>

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 39 OF 108         (check only one)       Image: state
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Init Kurmakov, Aleksey, N, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr			02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327759
	Harrisburg	PA	17112-1040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		ior Vice President	_
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	]
В.	Full Name of Individual (Last, First, Middle Init Kurmakov, Aleksey, N, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr	03 08 2019		
	City	State	Zip Code	Transaction ID : A2019-521941
	Harrisburg	PA	17112-1040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	]
<u>с.</u>	Full Name of Individual (Last, First, Middle Init Kurmakov, Aleksey, N, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr			03 / D D / Y Y Y Y 22 2019
	City Harrisburg	State PA	Zip Code 17112-1040	Transaction ID : A2019-540432 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34	]
s	UBTOTAL of Receipts This Page (optional)			346.17
Т	OTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER:         PAGE         40         OF         108           (check only one)
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements maname and a	ay not l address	be sold or used by any pe of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
Α.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Drganiza	ation Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr	Chata	7:	- Oada	M         M         /         D         D         /         Y         Y         Y         Y           04         05         2019
	City Harrisburg	State PA		p Code 17112-1040	Transaction ID : A2019-826014
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼ 807.73	
в.	Full Name of Individual (Last, First, Middle Initia Kurmakov, Aleksey, N, Mr.,	al) or Full C	Drganiza	ation Name	Date of Receipt
	Mailing Address 2409 W Bayberry Dr				04 / D D / Y Y Y Y 04 19 2019
	City Harrisburg	State PA	'	p Code 7112-1040	Transaction ID : A2019-826577           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼ 923.12	
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Drganiza	ation Name	Date of Receipt
	Mailing Address 26 Joseph Drive				01 25 2019
	City Boiling Springs	State PA		p Code 7007	Transaction ID : A2019-45746 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	(for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate			
s	UBTOTAL of Receipts This Page (optional)				346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       41       OF       108         (check only one)       ************************************			
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	С					
Full Name of Individual (Last, First, Middle In A. Lewandowski, Bernard, , Mr.,	itial) or Full C	organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive			02 08 2019			
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-113404           Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation Receipt For:	Sen	upation (for Individual) nor Vice President	Memo Item			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17	1			
Full Name of Individual (Last, First, Middle In B. Lewandowski, Bernard, , Mr.,	itial) or Full C	organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive						
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-327773 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	]			
Full Name of Individual (Last, First, Middle In C. Lewandowski, Bernard, , Mr.,	itial) or Full C	organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive			03 08 2019			
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-521955 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.95	]			
SUBTOTAL of Receipts This Page (optional)			346.17			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         42         OF         108           (check only one)         11a         11b         11c         12           13         14         15         16         17			
Any information copied from such Reports and or for commercial purposes, other than using the	Statements made and a	ay not be sold or used by any p address of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	C					
Full Name of Individual (Last, First, Middle Ir           A.         Lewandowski, Bernard, , Mr.,	nitial) or Full C	organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive	0		03 / 22 / Y Y Y 2019			
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-540446           Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]			
Full Name of Individual (Last, First, Middle Ir B. Lewandowski, Bernard, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive	Mailing Address 26 Joseph Drive					
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-826028			
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) hior Vice President	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]			
Full Name of Individual (Last, First, Middle Ir C. Lewandowski, Bernard, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 26 Joseph Drive			04 19 2019			
City Boiling Springs	State PA	Zip Code 17007	Transaction ID : A2019-826591           Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		115.39			
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	]			
SUBTOTAL of Receipts This Page (optional)			346.17			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         43         OF         108           (check only one)         I1a         11b         11c         12           13         14         15         16         17
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	>		
Α.	Full Name of Individual (Last, First, Middle Init Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			03 15 2019
	City	State	Zip Code	Transaction ID : A2019-605075
	Destin	FL	32541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President of Operations	
	Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼		230.82	
P	Full Name of Individual (Last, First, Middle Init Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
ь.	Mailing Address 36 Indian Bayou Drive			03 29 2019
	City	State	Zip Code	Transaction ID : A2019-605070
	Destin	FL	32541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President of Operations	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		, 269,29	
с.	Full Name of Individual (Last, First, Middle Init Lindley, Lauren, B, Ms.,	ial) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			04 / D D / Y Y Y Y 2019
	City Destin	State FL	Zip Code 32541	Transaction ID : A2019-745640         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Operations	Memo Item
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 307.76	
s	UBTOTAL of Receipts This Page (optional)			115.41
Т	OTAL This Period (last page this line number of	only)	·····	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       44       OF       108         (check only one)       11a       11b       11c       12         113       14       15       16       17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	,		
Α.	Full Name of Individual (Last, First, Middle Initi Lindley, Lauren, B, Ms.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 36 Indian Bayou Drive			04 26 2019
	City	State	Zip Code	Transaction ID : A2019-826051
	Destin	FL	32541	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.47
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		e President of Operations	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.23	]
В.	Full Name of Individual (Last, First, Middle Initi Malatesta, Michael, F, Mr.,	al) or Full C	Prganization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			01 25 2019
	City	State	Zip Code	Transaction ID : A2019-45739
	Schwenksville	PA	19473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		, 230.78	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Malatesta, Michael, F, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 4145 Serenity Street			02 / D D / Y Y Y Y 02 08 2019
	City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-113397
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	]
s	UBTOTAL of Receipts This Page (optional)			269.25
т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			fo	Jse separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         45         OF         108           (check only one)         I1a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements maname and a	ay no Iddre	ot be sold or used by any p ess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;			
Α.				ization Name	Date of Receipt
	Mailing Address 4145 Serenity Street				M M / D D / Y Y Y Y Y 02 22 2019
	City	State		Zip Code	Transaction ID : A2019-327766
	Schwenksville	PA		19473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual)		•	ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:			/ice President	
	Primary General Other (specify) ▼	Aggregate	rea	r-to-Date ▼ 461.56	
В.	Full Name of Individual (Last, First, Middle Initi Malatesta, Michael, F, Mr.,	al) or Full C	rgan	ization Name	Date of Receipt
	Mailing Address 4145 Serenity Street	03 08 2019			
	City	State		Zip Code	Transaction ID : A2019-521948
	Schwenksville	PA	_	19473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	_		115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) /ice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 576.95	
с.	Full Name of Individual (Last, First, Middle Initi Malatesta, Michael, F, Mr.,	al) or Full C	rgan	ization Name	Date of Receipt
	Mailing Address 4145 Serenity Street				03 / D D / Y Y Y Y 2019
	City Schwenksville	State PA		Zip Code 19473	Transaction ID : A2019-540439
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) ice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 692.34	
s	UBTOTAL of Receipts This Page (optional)				346.17
Т	OTAL This Period (last page this line number of	only)			

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       46       OF       108         (check only one)       ************************************
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	лС		
Full Name of Individual (Last, First, Middle I A. Malatesta, Michael, F, Mr.,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 4145 Serenity Street			04 05 / Y Y Y Y 04 05 2019
City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-826021 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	1
Full Name of Individual (Last, First, Middle I B. Malatesta, Michael, F, Mr.,	nitial) or Full C	Prganization Name	Date of Receipt
Mailing Address 4145 Serenity Street	Otata	Zin Oode	04 / D D / Y Y Y Y 2019
City Schwenksville	State PA	Zip Code 19473	Transaction ID : A2019-826584 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	1
Full Name of Individual (Last, First, Middle I C. Marshall, Christopher, L, Mr.,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 4966 Cline Hollow Road			01 / Y Y Y Y 01 25 2019
City Export	State PA	Zip Code 15632	Transaction ID : A2019-45774 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78	]
SUBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       47       OF       108         (check only one)
	y information copied from such Reports and S for commercial purposes, other than using the	erson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)		
A.	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	Drganization Name	Date of Receipt
	Mailing Address 4966 Cline Hollow Road			02 08 2019
	City	State	Zip Code	Transaction ID : A2019-113392
	Export	PA	15632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Select Medical Corporation	Ser	nior Vice President	
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) V		346.17	
	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	Drganization Name	Date of Receipt
D.	Mailing Address 4966 Cline Hollow Road			02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327761
	Export	PA	15632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date <b>V</b>	
	Other (specify) ▼		, 461.56	
<u>с.</u>	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	Drganization Name	Date of Receipt
	Mailing Address 4966 Cline Hollow Road			03 / D D / Y Y Y Y 03 08 / 2019
	City Export	State PA	Zip Code 15632	Transaction ID : A2019-521943
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		supation (for Individual) nor Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.95	
s	UBTOTAL of Receipts This Page (optional)		••••••	346.17
Т	OTAL This Period (last page this line number of	only)	••••••	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       48       OF       108         (check only one)       I1a       11b       11c       12         I1a       11b       11c       12         I3       14       15       16       17
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	erson for the purpose of soliciting contributions		
	Select Medical Corporation PAC	)		
Α.	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 4966 Cline Hollow Road			03 22 2019
	City	State	Zip Code	Transaction ID : A2019-540434
	Export	PA	15632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		ior Vice President	_
	Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) <b>v</b>	L	692.34	
в.	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 4966 Cline Hollow Road	04 05 2019		
	City	State	Zip Code	Transaction ID : A2019-826016
	Export	PA	15632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) <b>v</b>		807.73	]
— C.	Full Name of Individual (Last, First, Middle Init Marshall, Christopher, L, Mr.,	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 4966 Cline Hollow Road			04 19 2019
	City	State	Zip Code	Transaction ID : A2019-826579
	Export	PA	15632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	]
	UBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			f	Jse separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         49         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17
	y information copied from such Reports and St for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	,			
Α.	Full Name of Individual (Last, First, Middle Initi McLain, Cynthia, G, Mrs.,	al) or Full C	Drgar	nization Name	Date of Receipt
	Mailing Address 1120 South Albert Pike				01 25 2019
	City Fact Creith	State		Zip Code	Transaction ID : A2019-45750
	Fort Smith	AR	_	72903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual)		•	ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:			esident	
	Primary General	Aggregale	rea	r-to-Date ▼	1
	Other (specify) <b>v</b>		-9-	230.78	1
_	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Drgar	nization Name	Date of Deceint
в.	McLain, Cynthia, G, Mrs., Mailing Address 1120 South Albert Pike				Date of Receipt
	City	State		Zip Code	02 08 2019
	Fort Smith	AR		72903	Transaction ID : A2019-113368           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation			tion (for Individual) esident	Memo Item
	Receipt For: Primary General	Aggregate	Yea	r-to-Date ▼	
	Other (specify) V		<b>,</b>	346.17	
C.	Full Name of Individual (Last, First, Middle Initi McLain, Cynthia, G, Mrs.,	al) or Full C	Drgar	nization Name	Date of Receipt
	Mailing Address 1120 South Albert Pike				M M / D D / Y Y Y Y 02 22 2019
	City Fort Smith	State AR		Zip Code 72903	Transaction ID : A2019-327777
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) sident	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 461.56	]
s	UBTOTAL of Receipts This Page (optional)				346.17
т	OTAL This Period (last page this line number c	only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         50         OF         108           (check only one)         Image: Check only only one)         Image: Check only only only one)         Image: Check only only one)         Image: Check only only only one)         Image: Check only one)         Image: Check only only only one)<
	y information copied from such Reports and Stat for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initial McLain, Cynthia, G, Mrs.,	) or Full C	Drganization Name	Date of Receipt
	Mailing Address 1120 South Albert Pike			03 / D D / Y Y Y Y 03 08 2019
	City Fort Smith	State AR	Zip Code 72903	Transaction ID : A2019-521959
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 576.95	
— В	Full Name of Individual (Last, First, Middle Initial McNulty, James, , Mr.,	) or Full C	Drganization Name	Date of Receipt
υ.	Mailing Address 208 Woodside Avenue			01 25 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-45738 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.78	
<u> </u>	Full Name of Individual (Last, First, Middle Initial McNulty, James, , Mr.,	) or Full C	Drganization Name	Date of Receipt
	Mailing Address 208 Woodside Avenue	State	Zin Codo	02 08 2019 Transaction 10 + 4 0040 442200
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-113396 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President of Operations	Memo Item
		Aggregate	e Year-to-Date ▼	
	Other (specify)		346.17	
s	UBTOTAL of Receipts This Page (optional)			346.17

TOTAL This Period (last page this line number only)
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         51         OF         108           (check only one)         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 208 Woodside Avenue			M M / D D / Y Y Y Y 02 22 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-327765 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	
В.	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 208 Woodside Avenue			03 08 / Y Y Y Y 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-521947 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) hior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	]
<u> </u>	Full Name of Individual (Last, First, Middle Initia McNulty, James, , Mr.,	al) or Full C	Organization Name	Date of Receipt
0.	Mailing Address 208 Woodside Avenue			03 22 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-540438 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34	]
s	UBTOTAL of Receipts This Page (optional)			▶ 346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         52         OF         108           (check only one)         Image: Check
	y information copied from such Reports and Stat for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initial McNulty, James, , Mr.,	) or Full C	Organization Name	Date of Receipt
	Mailing Address 208 Woodside Avenue			04 05 / Y Y Y Y 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-826020 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]
В.	Full Name of Individual (Last, First, Middle Initial McNulty, James, , Mr.,	) or Full C	Organization Name	Date of Receipt
	Mailing Address 208 Woodside Avenue			04 19 2019
	City Narberth	State PA	Zip Code 19072	Transaction ID : A2019-826583 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President of Operations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923,12	]
<u> </u>	Full Name of Individual (Last, First, Middle Initial Mullin, Thomas, P, Mr.,	) or Full C	Organization Name	Date of Receipt
	Mailing Address 215 St James Court	1		01 / Y Y Y Y 25 2019
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-45752         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) of Operating Officer	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78	]
s	UBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       53       OF       108         (check only one)       11a       11b       11c       12         1       13       14       15       16       17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements mand a	hay not be sold or used by any per address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	Select Medical Corporation PAC	;		
Α.	Full Name of Individual (Last, First, Middle Initi Mullin, Thomas, P, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 215 St James Court			02 08 2019
	City	State	Zip Code	Transaction ID : A2019-113370
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		ief Operating Officer	
	Primary General	Ayyreyale	e Year-to-Date ▼	
	Other (specify) <b>v</b>	L	346.17	
В.	Full Name of Individual (Last, First, Middle Initi Mullin, Thomas, P, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 215 St James Court	02 22 2019		
	City	State	Zip Code	Transaction ID : A2019-327779
	Mechanicsburg	PA	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) hief Operating Officer	Memo Item
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		461.56	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Mullin, Thomas, P, Mr.,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 215 St James Court			03 08 2019
	City Mechanicsburg	State PA	Zip Code 17050	Transaction ID : A2019-521961
		_	17050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) ief Operating Officer	Memo Item
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary     General       Other (specify)		576.95	
	UBTOTAL of Receipts This Page (optional)			346.17
IΤ	OTAL This Period (last page this line number of	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         108           (check only one)
Any information copied from such Reports and s or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	C		
Full Name of Individual (Last, First, Middle In A. Mullin, Thomas, P, Mr., Mailing Address 215 St James Court	nitial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	03 22 2019 Transaction ID : A2019-540451
Mechanicsburg FEC ID number of contributing	РА	17050	Amount of Each Receipt this Period
federal political committee.          Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼	Occi	upation (for Individual) of Operating Officer Year-to-Date ▼ 692.34	Memo Item
Full Name of Individual (Last, First, Middle In B. Mullin, Thomas, P, Mr., Mailing Address 215 St James Court	hitial) or Full O	rganization Name	Date of Receipt
City Mechanicsburg FEC ID number of contributing federal political committee.	State PA	Zip Code 17050	Transaction ID : A2019-826033       Amount of Each Receipt this Period       115.39
Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify) ▼	Chie	upation (for Individual) ef Operating Officer Year-to-Date ▼ 807.73	Memo Item
C. Full Name of Individual (Last, First, Middle In Mullin, Thomas, P, Mr., Mailing Address 215 St James Court	itial) or Full O	rganization Name	Date of Receipt
City Mechanicsburg	State PA	Zip Code 17050	04     19     2019       Transaction ID : A2019-826596       Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual)         Select Medical Corporation         Receipt For:         Primary       General         Other (specify)	Chie	upation (for Individual) f Operating Officer Year-to-Date ▼ 923.12	Memo Item
SUBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			fc D	Jse separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         55         OF         108           (check only one)         I1a         11b         11c         12           I13         14         15         16         17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay no addre	ot be sold or used by any p ess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left \right\rangle$	Select Medical Corporation PAC	,			
Α.	····			ization Name	Date of Receipt
	Mailing Address 5782 Stillwell Court				03 22 2019
	City	State		Zip Code	Transaction ID : A2019-540444
	Harrisburg	PA		17112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			38.47
	Name of Employer (for Individual)		•	ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:				
	Primary General	Aggregate	real	r-to-Date ▼	
	Other (specify) ▼	L	- <b>J</b> -	230.82	
R	Full Name of Individual (Last, First, Middle Initi Mumma, Michael, J, Mr.,	al) or Full C	)rgan	ization Name	Date of Receipt
υ.	Mailing Address 5782 Stillwell Court				04 05 2019
	City	State		Zip Code	Transaction ID : A2019-826026
	Harrisburg	PA		17112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			38.47
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident	Memo Item
	Receipt For: Primary General	Aggregate	Yea	r-to-Date ▼	
	Other (specify) ▼		Ļ.	269.29	
С.	Full Name of Individual (Last, First, Middle Initi Mumma, Michael, J, Mr.,	al) or Full C	rgan	ization Name	Date of Receipt
	Mailing Address 5782 Stillwell Court	1			04 / D D / Y Y Y Y 2019
	City Harrisburg	State PA		Zip Code 17112	Transaction ID : A2019-826589
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 38.47
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) sident	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year	r-to-Date ▼ 307.76	
s	UBTOTAL of Receipts This Page (optional)				115.41
Т	OTAL This Period (last page this line number of	only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         56         OF         108           (check only one)         Image: Check only one in the image: Check on t
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	l) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive			01 / Y Y Y Y 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-45778
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78	]
	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	l) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive	1-		02 01 Y Y Y Y Y 02 01 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-101430 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17	]
	Full Name of Individual (Last, First, Middle Initia Naselli Jr., Francis, P, Mr.,	l) or Full C	Organization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive	1		02 / D D / Y Y Y Y 02 15 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-278284
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ional Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.56	]
s	UBTOTAL of Receipts This Page (optional)			346.17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         57         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements mana name and a	ay not be sold or used by any paddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)		
Α.	Full Name of Individual (Last, First, Middle Init Naselli Jr., Francis, P, Mr.,	ial) or Full C	Drganization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive			03 01 2019
	City	State	Zip Code	Transaction ID : A2019-335146
	Media	PA	19063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.39
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		gional Vice President	
	Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	L	576.95	
_	Full Name of Individual (Last, First, Middle Init Naselli Jr., Francis, P, Mr.,	ial) or Full C	Drganization Name	Data of Dassist
в.	Mailing Address 655 North Heilbron Drive			Date of Receipt
	City	State	Zip Code	03 15 2019 Transaction ID : A2019-605074
	Media	PA	19063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify) ▼		, 692.34	
С.	Full Name of Individual (Last, First, Middle Init Naselli Jr., Francis, P, Mr.,	ial) or Full C	Drganization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive			03 / D D / Y Y Y Y 29 / 2019
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-605069
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) gional Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 807.73	
s	UBTOTAL of Receipts This Page (optional)			346.17
Т	OTAL This Period (last page this line number of	only)	••••••	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         58         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements mana and a	ay no addre	ot be sold or used by any p ess of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	)			
Α.				nization Name	Date of Receipt
	Mailing Address 655 North Heilbron Drive				04 12 2019
	City	State		Zip Code	Transaction ID : A2019-745639
	Media	PA	_	19063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			115.39
	Name of Employer (for Individual)			ion (for Individual)	Memo Item
	Select Medical Corporation Receipt For:		-	Il Vice President	
	Primary General Other (specify) ▼	Aggregate	rea	r-to-Date ▼ 923.12	]
– R	Full Name of Individual (Last, First, Middle Init Naselli Jr., Francis, P, Mr.,	ial) or Full C	Organ	ization Name	Date of Receipt
5.	Mailing Address 655 North Heilbron Drive				04 26 2019
	City	State		Zip Code	Transaction ID : A2019-826050
	Media	PA		19063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			115.39
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) al Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1038.51	
с.	Full Name of Individual (Last, First, Middle Init Nichols, Gregory, C, Mr.,	ial) or Full C	Organ	nization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge				02 08 / Y Y Y Y 02 08 2019
	City Prattville	State AL		Zip Code 36066	Transaction ID : A2019-113372
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) ht of Network Development	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 230.79	
s	UBTOTAL of Receipts This Page (optional)				307.71
Т	OTAL This Period (last page this line number of	only)			

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       59       OF       108         (check only one)       11a       11b       11c       12         13       14       15       16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge			02 22 2019
	City	State	Zip Code	Transaction ID : A2019-327781
	Prattville	AL	36066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	-
	Primary General Other (specify) ▼		307.72	]
В.	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	Prganization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge			03 08 2019
	City	State	Zip Code	Transaction ID : A2019-521963
	Prattville	AL	36066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) sident of Network Development	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.65	
<u> </u>	Full Name of Individual (Last, First, Middle Initia Nichols, Gregory, C, Mr.,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 303 Highpointe Ridge			03 22 2019
	City Prattville	State AL	Zip Code 36066	Transaction ID : A2019-540453 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.93
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Select Medical Corporation	Pres	sident of Network Development	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)		461.58	1
s	UBTOTAL of Receipts This Page (optional)			230.79

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SCHEDULE A (FEC Form 3X)       Use separate schedule(s) for each category of the Detailed Summary Page       FOR LINE NUMBER: PAGE 60 OF Check only one)         ITEMIZED RECEIPTS       Ita	108 ] 17 s
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)         Select Medical Corporation PAC         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. Nichols, Gregory, C, Mr.,         Mailing Address 303 Highpointe Ridge         City         Prattville         Receipt For:         Primary         General         Other (specify) ▼         State         Zip Code         Primary         General         Other (specify) ▼         State         Zip Code         Primary         General         Other (specify) ▼         Aggregate Year-to-Date ▼         Date of Receipt         Mailing Address 303 Highpointe Ridge         City         Prattville         AL         36066         FEC ID number of contributing tear-ato-ato-ato-ato-ato-ato-ato-ato-ato-ato	s
Select Medical Corporation PAC         A. Nichols, Gregory, C, Mr.,         Mailing Address 303 Highpointe Ridge         City         Prativille         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Select Medical Corporation         President of Network Development         Receipt For:         Primary       General         Other (specify) v         B. Nichols, Gregory, C, Mr.,         Mailing Address 303 Highpointe Ridge         City         Primary         General         Other (specify) v         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. Nichols, Gregory, C, Mr.,         Mailing Address 303 Highpointe Ridge         City         Prattville         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. Nichols, Gregory, C, Mr.,         Mailing Address 303 Highpointe Ridge         City       State         Prattville         FEC ID number of contributing federal political committee.         City       State         Zip Code         REC ID number of contributing federent polititeal committee.	
A. Nichols, Gregory, C, Mr.,       Date of Receipt         Mailing Address 303 Highpointe Ridge       Zip Code         City       State       Zip Code         Prattville       AL       36066         FEC ID number of contributing federal political committee.       C       76.93         Name of Employer (for Individual)       Occupation (for Individual)       President of Network Development         Receipt For:       Primary       General       Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. Nichols, Gregory, C, Mr.,       Mailing Address 303 Highpointe Ridge       Date of Receipt         City       State       Zip Code         Prattville       AL       36066         FEC ID number of contributing federal political committee.       C         Other (specify) ▼       State       Zip Code         All       36066       Transaction ID : A2019-826598         Amount of Each Receipt this Period       Transaction ID : A2019-826598         Amount of Each Receipt this Period       Transaction ID : A2019-826598         Amount of Each Receipt this Period       Transaction ID : A2019-826598         Amount of Each Receipt this Period       Transaction ID : A2019-826598         Amount of Each	
City     State     Zip Code       Prattville     AL     36066       FEC ID number of contributing     C       federal political committee.     C       Name of Employer (for Individual)     Occupation (for Individual)       Select Medical Corporation     President of Network Development       Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify) ▼     Aggregate Year-to-Date ▼       B. Nichols, Gregory, C, Mr.,     Date of Receipt       Mailing Address 303 Highpointe Ridge     C       City     State     Zip Code       Prattville     AL     36066       FLI Number of contributing federal political committee.     C	
Prattville       AL       36066         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual)       Occupation (for Individual)       President of Network Development         Receipt For:       Aggregate Year-to-Date ▼       Memo Item         Primary       General       538.51         Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         B. Nichols, Gregory, C, Mr.,       Date of Receipt       Memo Item         City       State       Zip Code         Prattville       AL       36066         FEC ID number of contributing federal political committee.       C	
FEC ID number of contributing federal political committee.       C       76.93         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         Select Medical Corporation       President of Network Development       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       Memo Item         Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         B. Nichols, Gregory, C, Mr.,       Date of Receipt       Mailing Address 303 Highpointe Ridge         City       State       Zip Code       Mount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       76.93	
Select Medical Corporation       President of Network Development         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       538.51         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. Nichols, Gregory, C, Mr.,       04         Mailing Address 303 Highpointe Ridge       04         City       State       Zip Code         Prattville       AL       36066         FEC ID number of contributing federal political committee.       C	
Primary       General         Other (specify)       538.51         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Nichols, Gregory, C, Mr.,       Mailing Address 303 Highpointe Ridge       Date of Receipt         City       State       Zip Code         Prattville       AL       36066         FEC ID number of contributing federal political committee.       C	
B. Nichols, Gregory, C, Mr.,       Date of Receipt         Mailing Address 303 Highpointe Ridge       04       19       2019         City       State       Zip Code       Transaction ID : A2019-826598         Prattville       AL       36066       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       76.93	
City     State     Zip Code       Prattville     AL     36066       FEC ID number of contributing federal political committee.     C     Transaction ID : A2019-826598	
FEC ID number of contributing federal political committee.	
Name of Employer (for Individual)     Occupation (for Individual)     Memo Item       Select Medical Corporation     President of Network Development	
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       615.44	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         C. Noro, Sharon, A, Mrs.,         Date of Receipt	
Mailing Address 24 3rd St 01 25 2019	
CityStateZip CodeTransaction ID : A2019-45757AspinwallPA15215-2904Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	
Name of Employer (for Individual)     Occupation (for Individual)     Memo Item       Select Medical Corporation     Vice President     Memo Item	
Receipt For:     Aggregate Year-to-Date ▼       Other (specify)     230.78	

SUBTOTAL of Receipts This Page (optional)	Г					26	9.25	
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						1.1		
TOTAL This Period (last page this line number only)			-	 	-	 	-	

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         61         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17										
Ar	for commercial purposes, other than using the	Statements mane and a	ay not be sold or used by any paddress of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA	С												
Α.		itial) or Full C	Organization Name	Date of Receipt										
	Mailing Address 24 3rd St			02 08 2019										
	City Aspinwall	State PA	Zip Code 15215-2904	Transaction ID : A2019-113375 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17	]										
В.	Full Name of Individual (Last, First, Middle In Noro, Sharon, A, Mrs., Mailing Address 24 3rd St	itial) or Full C	Organization Name	Date of Receipt										
	City	State	Zip Code	Transaction ID : A2019-327784										
	Aspinwall FEC ID number of contributing federal political committee.	C	15215-2904	Amount of Each Receipt this Period										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 461.56	]										
C.	Full Name of Individual (Last, First, Middle In Noro, Sharon, A, Mrs., Mailing Address 24 3rd St	itial) or Full C	Organization Name	Date of Receipt										
	City	State	Zip Code	M         M         /         D         D         /         Y										
	Aspinwall	PA	15215-2904	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.39										
	Name of Employer (for Individual) Select Medical Corporation Receipt For:	Vice	e President	Memo Item										
		Aggregate	Year-to-Date 🔻											

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SUBTOTAL of Receipts This Page (optional)									346	.17
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TOTAL This Period (last page this line number	only)		 	-			-			

576.95

Primary

Other (specify)

General

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 62 OF

108

	EMIZED RECEIPTS			or each category of the Detailed Summary Page			1a 3		] 11   14	H		11c 15		12 16		17
	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		pos	se of	f sol	liciting	con	ntribu	tions	
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC															
Α.	Full Name of Individual (Last, First, Middle Initial) Noro, Sharon, A, Mrs.,	) or Full O	rgar	nization Name		Da	ite of	Re	ecei	ipt						
	Mailing Address 24 3rd St	State		Zip Code			03	/		22			20	)19 19	Y	
	Aspinwall	PA		15215-2904								019-54 eipt thi				
	FEC ID number of contributing federal political committee.	С							-	_	_	- <b>T</b>	_	115.	39	
	Name of Employer (for Individual) Select Medical Corporation	ion (for Individual) esident			Me	emo	o Ite	əm								
	Receipt For: Primary General Other (specify) ▼	r-to-Date ▼ 692.34														
В.	Full Name of Individual (Last, First, Middle Initial, Noro, Sharon, A, Mrs.,	) or Full O	rgai	nization Name		Da	ite of	Re	ecei	ipt						
	Mailing Address 24 3rd St				M	04	/	Ľ	05		/ Y	۲ 20	ү 19	Y		
	City Aspinwall	State PA		Zip Code 15215-2904	_							<b>019-82</b> eipt thi		-		
	FEC ID number of contributing federal political committee.	С				Ē			-	_	_	-97-	_	115.	39	
	Name of Employer (for Individual) Select Medical Corporation			tion (for Individual) esident			Me	emo	o Ite	əm						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 807.73												
C.	Full Name of Individual (Last, First, Middle Initial Noro, Sharon, A, Mrs.,	) or Full O	rgai	nization Name		Da	ite of	Re	ecei	ipt						
	Mailing Address 24 3rd St	1				IV	04 <sup>M</sup>	/	E	D 19		/ Y	20 <sup>-</sup>	19 <sup>°</sup>	Y	
	City Aspinwall	State PA		Zip Code 15215-2904	-							2 <b>019-8</b> 2 eipt thi				
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period											
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) sident			Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 923.12												
s	UBTOTAL of Receipts This Page (optional)			•					7			9	_	346.	17	
т	OTAL This Period (last page this line number onl	y)			-				_			-				

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       63       OF       108         (check only one)       ************************************
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	AC		
Full Name of Individual (Last, First, Middle A. Ortenzio, Rocco, A, Mr.,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7 Westwind Dr			01 25 2019
City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-45768 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) Chairman	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 384.62	1
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	
B. Ortenzio, Rocco, A, Mr., Mailing Address 7 Westwind Dr			Date of Receipt
City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-113386 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.31
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e-Chairman	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.93	]
Full Name of Individual (Last, First, Middle C. Ortenzio, Rocco, A, Mr.,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7 Westwind Dr			02 / D D / Y Y Y Y 2019
City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-327755 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) -Chairman	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 769.24	1

576.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)...... 100

SCHEDULE A (FEC Form 3)	K)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 64 OF (check only one)										
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$										
			r person for the purpose of soliciting contributions tee to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) Select Medical Corporation F	PAC												
Full Name of Individual (Last, First, Middle Ortenzio, Rocco, A, Mr.,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 7 Westwind Dr			M M / D D / Y Y Y Y 03 08 2019										
City	State	Zip Code	Transaction ID : A2019-521937										
Lemoyne	PA	17043-1234	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.31										
Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item										
Select Medical Corporation	Vice	-Chairman											
Receipt For:	Aggregate	Year-to-Date <b>V</b>											
Other (specify) V		961.55											

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ortenzio, Rocco, A, Mr., Date of Receipt Mailing Address 7 Westwind Dr Μ 03 22 2019 City Zip Code State Transaction ID : A2019-540428 Lemoyne PA 17043-1234 Amount of Each Receipt this Period FEC ID number of contributing С 192.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Select Medical Corporation Vice-Chairman Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1153.86

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Ortenzio, Rocco, A, Mr.,

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

Mailing Address 7 Westwind Dr			04 05 2019
City	State	Zip Code	Transaction ID : A2019-826010
Lemoyne	PA	17043-1234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.31
Name of Employer (for Individual) Select Medical Corporation		pation (for Individual) Chairman	Memo Item
Receipt For: Primary General Other (specify)			
SUBTOTAL of Receipts This Page (optional	)	•	576.93

FEC Schedule A (Form 3X) Rev. 06/2016

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Date of Receipt

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108

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 65 OF 108 (check only one)
_			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Ortenzio, Rocco, A, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 7 Westwind Dr			04 / D D / Y Y Y Y Y 04 19 2019
	City Lemoyne	State PA	Zip Code 17043-1234	Transaction ID : A2019-826573 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e-Chairman	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1538.48	
В.	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 21723 E Rowland Cir			01 25 2019
	City Aurora	State CO	Zip Code 80016-3608	Transaction ID : A2019-45767 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Pegler, William, L, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 21723 E Rowland Cir			02 08 2019
	City Aurora	State CO	Zip Code 80016-3608	Transaction ID : A2019-113385 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	
s	UBTOTAL of Receipts This Page (optional)			423.09

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)						PAGE	E 66 C	)F 108							
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						13	14	15	16	17							
	ny information copied from such Reports and S for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA			indian Nama													
Α.	Full Name of Individual (Last, First, Middle In Pegler, William, L, Mr.,	Itial) of Full C	Jrgar	lization Name		Date o	of Receipt										
	Mailing Address 21723 E Rowland Cir					02	/ D	D / Y 2	ү ү 2019	Y							
	City	State		Zip Code	Transaction ID : A2019-327794												
	Aurora	CO		80016-3608		Amoun	t of Each	Receipt thi	s Period								
	FEC ID number of contributing federal political committee.	С	i.					-	115.	39							
	Name of Employer (for Individual)	Occ	upat	ion (for Individual)		M	lemo Item										
	Select Medical Corporation	Vice	e Pre	esident													
	Receipt For:	Aggregate	Yea	r-to-Date 🔻													
	Primary General			461.56	11.												
	Other (specify) <b>v</b>		-9		4												
В.	Full Name of Individual (Last, First, Middle In Pegler, William, L, Mr.,	itial) or Full C	Orgar	nization Name		Date o	of Receipt										
	Mailing Address 21723 E Rowland Cir					M M	/ D	D / Y B	y y 2019	Y							
	City	State		Zip Code	Transaction ID : A2019-521936												
	Aurora	CO		80016-3608	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			115.30												
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) esident		M	lemo Item										
	Receipt For:	Aggregate	Yea	r-to-Date ▼													
	Primary General			570.05	11.												
	Other (specify)		,	576.95	4												
с.	Full Name of Individual (Last, First, Middle In Pegler, William, L, Mr.,	itial) or Full C	Orgar	ization Name		Date o	of Receipt										
	Mailing Address 21723 E Rowland Cir					03	/ D	D / Y 2	y y 2019	Y							
	City	State		Zip Code		Trans	saction ID	: A2019-5	40466								
	Aurora	CO		80016-3608		Amoun	t of Each	Receipt thi	s Period								
	FEC ID number of contributing federal political committee.	С						, ,	115.	39							
	Name of Employer (for Individual) Select Medical Corporation		•	ion (for Individual) sident		N	1emo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 692.34	]												

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SUBTOTAL of Receipts This Page (optional)		_		9		y	346	6.17	
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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       108         (check only one)       I1a       11b       11c       12         13       14       15       16       17							
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC										
Α.	Full Name of Individual (Last, First, Middle Init Pegler, William, L, Mr.,	tial) or Full C	rganization Name	Date of Receipt							
	Mailing Address 21723 E Rowland Cir			04 / D D / Y Y Y Y 04 05 2019							
	City	State CO	Zip Code	Transaction ID : A2019-826048							
	Aurora	0	80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
	Select Medical Corporation	Vice	President								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	00 0		1							
	Other (specify) <b>v</b>	L	807.73								
R	Full Name of Individual (Last, First, Middle Init Pegler, William, L, Mr.,	tial) or Full C	rganization Name	Date of Receipt							
р.	Mailing Address 21723 E Rowland Cir										
	Maining Address 21723 E Rowland Cir	04 19 2019									
	City	State	Zip Code	Transaction ID : A2019-826572							
	Aurora	со	80016-3608	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
Name of Employer (for Individual) Select Medical Corporation			upation (for Individual) e President	Memo Item							
	Receipt For:	Aggregate	Year-to-Date V	-							
	Primary General Other (specify) ▼		923.12	]							
с.	Full Name of Individual (Last, First, Middle Init Pennacchia, Raymond, J, Mr.,	tial) or Full C	rganization Name	Date of Receipt							
	Mailing Address 6 Cold Spring Lane	01 25 2019									
	City	State	Zip Code	Transaction ID : A2019-45737							
	Media	PA	19063	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Marketing Senior	Memo Item							
	Receipt For:	1	Year-to-Date ▼								
	Primary General Other (specify)		230.78	]							
s	UBTOTAL of Receipts This Page (optional)		<b>•</b>	346.17							

9	HEDULE A (FEC Form 3X)							
	· · · · · ·		Use separate schedule(s)	FOR LINE NUMBER: PAGE 68 OF 108 (check only one)				
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
			Detailed Summary Page	13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r							
$\square$	NAME OF COMMITTEE (In Full)							
	Select Medical Corporation PAC							
<u> </u>	Full Name of Individual (Last, First, Middle Initia	l) or Full C	Drganization Name					
Α.	Pennacchia, Raymond, J, Mr.,	Date of Receipt						
	Mailing Address 6 Cold Spring Lane	M         M         /         D         D         /         Y						
	City	State	Zip Code	Transaction ID : A2019-113395				
	Media	PA	19063	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		115.39				
	Name of Employer (for Individual)	Occ	supation (for Individual)	Memo Item				
	Select Medical Corporation	Vice	e President of Marketing Senior					
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General	33 - 3		1				
	Other (specify) <b>v</b>		346.17	1				
	Full Name of Individual (Last, First, Middle Initia							
В.	Pennacchia, Raymond, J, Mr.,	Date of Receipt						
	Mailing Address 6 Cold Spring Lane	02 22 2019						
	City	State	Zip Code	Transaction ID : A2019-327764				
	Media	PA	19063	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	115.39						
	Name of Employer (for Individual)	Memo Item						
	Select Medical Corporation		cupation (for Individual) e President of Marketing Senior					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General		161 FG	1				
	Other (specify)	L	461.56	1				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Pennacchia, Raymond, J, Mr.,	l) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 6 Cold Spring Lane		03 08 2019					
	City	State	Zip Code	Transaction ID : A2019-521946				
	Media	PA	19063	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		115.39				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President of Marketing Senior	Memo Item				
	Receipt For:	1						
	Primary General	Aggregate	Year-to-Date V					
	Other (specify)		576.95					
s	UBTOTAL of Receipts This Page (optional)		<b>b</b>	346.17				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule( for each category of the Detailed Summary Page	e(s) (check only one) ge 11a 11b 11c 12	108							
				any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.	17							
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Pennacchia, Raymond, J, Mr.,	ll) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 6 Cold Spring Lane			03 / D D / Y Y Y Y 22 2019								
	City	State	Zip Code	Transaction ID : A2019-540437								
	Media	PA	19063	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item								
	Select Medical Corporation	Vic	e President of Marketing Ser	enior								
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Other (specify) ▼		692.34	34								
В.	Full Name of Individual (Last, First, Middle Initia Pennacchia, Raymond, J, Mr.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 6 Cold Spring Lane	04 05 2019										
	City	State	Zip Code	Transaction ID : A2019-826019								
	Media	PA	19063	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President of Marketing Ser	enior Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 807.73	73								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Pennacchia, Raymond, J, Mr.,	ll) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 6 Cold Spring Lane			04 19 2019								
	City Media	State PA	Zip Code 19063	Transaction ID : A2019-826582 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item								
	Select Medical Corporation	Vice	e President of Marketing Sen	nior								
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Other (specify)	12										
s	UBTOTAL of Receipts This Page (optional)			346.17	٦							

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       70       OF       108         (check only one)       I1a       11b       11c       12         I13       14       15       16       17						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Α.	Full Name of Individual (Last, First, Middle Initia Polo, Fabian, E, Mr.,	al) or Full C	Organization Name	Date of Receipt						
	Mailing Address 7915 Glade Hill Ct			03 / D D / Y Y Y Y 22 2019						
	City	State	Zip Code	Transaction ID : A2019-540463						
	Dallas	ТХ	75218	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.47						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) O/Administrator	Memo Item						
	Receipt For:									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.82	1						
— B	Full Name of Individual (Last, First, Middle Initia Polo, Fabian, E, Mr.,	Date of Receipt								
υ.	Mailing Address 7915 Glade Hill Ct	04 05 2019								
	City	State	Zip Code	Transaction ID : A2019-826045						
	Dallas	ТХ	75218	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.47						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) O/Administrator	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.29	1						
 C.	Full Name of Individual (Last, First, Middle Initia Polo, Fabian, E, Mr.,	Date of Receipt								
	Mailing Address 7915 Glade Hill Ct			04 19 / Y Y Y Y 2019						
	City Dallas	State TX	Zip Code 75218	Transaction ID : A2019-826569 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.47						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) D/Administrator	Memo Item						
	Boogint For:		Year-to-Date V							
	Primary General Other (specify)		307.76	]						
s	UBTOTAL of Receipts This Page (optional)			115.41						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         71         OF         108           (check only one)				
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements mana and a	ay not be sold or used by any puddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;						
Α.	Full Name of Individual (Last, First, Middle Initi Rhodes, Chandelle, L, Ms.,	al) or Full C	organization Name	Date of Receipt				
	Mailing Address 20528 Lagoona Drive	03 / D D / Y Y Y Y 22 2019						
	City Cornelius	State NC	Zip Code 28031	Transaction ID : A2019-540452 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.82	]				
В.	Full Name of Individual (Last, First, Middle Initi Rhodes, Chandelle, L, Ms.,	al) or Full C	organization Name	Date of Receipt				
	Mailing Address 20528 Lagoona Drive	04 05 / Y Y Y Y 04 05						
	City Cornelius	State NC	Zip Code 28031	Transaction ID : A2019-826034 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.29	]				
— c.	Full Name of Individual (Last, First, Middle Initi Rhodes, Chandelle, L, Ms.,	al) or Full C	organization Name	Date of Receipt				
•	Mailing Address 20528 Lagoona Drive			04 19 / Y Y Y Y 2019				
	City Cornelius	State NC	Zip Code 28031	Transaction ID : A2019-826597 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 307.76	]				
s	UBTOTAL of Receipts This Page (optional)			115.41				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	he	LINE ck only 11a 13	MBER ne) 11b 14	:	PAGE	72 O	F
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a								
NAME OF COMMITTEE (In Full) Select Medical Corporation PAC								

Z	-							
Α.	Full Name of Individual (Last, First, Middle Init Rusignuolo, Brian, R, Mr.,	tial) or Full Or	ganization Name	Date of Receipt 01 / 25 / 2019				
	Mailing Address 1339 Sconsett Way							
	City	State	Zip Code	Transaction ID : A2019-45741				
	New Cumberland	PA	17070	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		192.31				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	Select Medical Corporation	Senio	or Vice President					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		384.62					
в.	Full Name of Individual (Last, First, Middle Init Rusignuolo, Brian, R, Mr.,	tial) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1339 Sconsett Way	1		02 08 / Y Y Y Y 2019				
	City	State	Zip Code	Transaction ID : A2019-113399				
	New Cumberland	PA	17070	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		192.31				
	Name of Employer (for Individual) Select Medical Corporation		ipation (for Individual) or Vice President	Memo Item				
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻					
	Other (specify)		576.93					
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Rusignuolo, Brian, R, Mr.,	tial) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1339 Sconsett Way		02 / D D / Y Y Y Y 22 2019					
	City	State	Zip Code	Transaction ID : A2019-327768				
	New Cumberland	PA	17070	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		192.31				
	Name of Employer (for Individual) Select Medical Corporation	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 769.24					
⊢	UBTOTAL of Receipts This Page (optional)			576.93				
т	OTAL This Period (last page this line number of							

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       73       OF       108         (check only one)       ************************************
	y information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;		
<u>А.</u>	Full Name of Individual (Last, First, Middle Initi Rusignuolo, Brian, R, Mr.,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 1339 Sconsett Way			M = M         /         D = D         /         Y = Y = Y = Y         Y         O3         08         2019         O3         O4         O4         O4         O4         O4
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-521950           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.55	]
в.	Full Name of Individual (Last, First, Middle Initi Rusignuolo, Brian, R, Mr., Mailing Address 1339 Sconsett Way	al) or Full O	rganization Name	Date of Receipt
	City New Cumberland FEC ID number of contributing federal political committee.	State PA	Zip Code 17070	03     22     2019       Transaction ID : A2019-540441       Amount of Each Receipt this Period       192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.86	]
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Rusignuolo, Brian, R, Mr.,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 1339 Sconsett Way			04 / D D / Y Y Y Y 2019
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-826023           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1346.17	]
Γ	URTOTAL of Receipts This Page (ontional)			576.93

SUBTOTAL of Paccelets This Page (optional)	- 1							576		
SUBTOTAL of Receipts This Page (optional)	- 14	-	y	-	y	_	-	-		d.
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TOTAL This Period (last page this line number only)	. I.		 7		-7		_			

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         74         OF         108           (check only one)         Image: Check only one (Check only one)         Image: Check only one										
	y information copied from such Reports and St for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;												
Α.	Full Name of Individual (Last, First, Middle Initi Rusignuolo, Brian, R, Mr.,	al) or Full (	Organization Name	Date of Receipt										
	Mailing Address 1339 Sconsett Way			04 / D D / Y Y Y Y 2019										
	City New Cumberland	State PA	Zip Code 17070	Transaction ID : A2019-826586           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		192.31										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1538.48											
в.	Full Name of Individual (Last, First, Middle Initi Ruskan, Jeffrey, J, Mr., Mailing Address 304 Beechwood Drive	al) or Full (	Organization Name	Date of Receipt										
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-45765										
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 384.62											
С.	Full Name of Individual (Last, First, Middle Initi Ruskan, Jeffrey, J, Mr.,	al) or Full (	Organization Name	Date of Receipt										
	Mailing Address 304 Beechwood Drive			M M / D D / Y Y Y Y 02 08 2019										
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-113383           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		192.31										
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item										
_	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 576.93											

SUBTOTAL of Receipts This Page (optional)	L	 		 	9	57	6.93	3
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         75         OF         108           (check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr.,	al) or Full (	Organization Name	Date of Receipt
	Mailing Address 304 Beechwood Drive	State	Zip Code	02 22 2019 Transaction ID : A2019-327792
	Richmond	VA	23229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 769.24	]
В.	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 304 Beechwood Drive			M         M         /         D         D         /         Y
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-521934 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) esident	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 961.55	]
<u> </u>	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 304 Beechwood Drive			03 / D D / Y Y Y Y 22 2019
	City Richmond	State VA	Zip Code 23229	Transaction ID : A2019-540464 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) sident	Memo Item
	Receipt For: Primary General Other (specify)	]		
s	JBTOTAL of Receipts This Page (optional)			576.93

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		f	Jse separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         76         OF         108           (check only one)         Image: Check only one in the image: Check only one in t								
	y information copied from such Reports and Sta for commercial purposes, other than using the n				rson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr.,	l) or Full C	Organ	nization Name	Date of Receipt								
	Mailing Address 304 Beechwood Drive				04 05 / Y Y Y Y 04 05								
	City Richmond	State VA		Zip Code 23229	Transaction ID : A2019-826046 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			192.31								
	Name of Employer (for Individual) Select Medical Corporation		upat side	tion (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 1346.17									
В.	Full Name of Individual (Last, First, Middle Initia Ruskan, Jeffrey, J, Mr., Mailing Address 304 Beechwood Drive	l) or Full C	Drgar	nization Name	Date of Receipt								
	<u></u>	State		Zin Code	04 19 2019								
	City Richmond	VA		Zip Code 23229	Transaction ID : A2019-826570           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			192.31								
	Name of Employer (for Individual) Select Medical Corporation		upat side	tion (for Individual) Int	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1538.48									
С.	Full Name of Individual (Last, First, Middle Initia Sarfaty, Beth, R, Ms.,	l) or Full C	Orgai	nization Name	Date of Receipt								
	Mailing Address 34 Wall Street				03 / D D / Y Y Y Y 22 2019								
	City West Long Branch	State NJ		Zip Code 07764	Transaction ID : A2019-540436 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			38.47								
	Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) cal Svcs & Quality Mgmt	Memo Item								
_	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 230.82									

SUBTOTAL of Receipts This Page (optional)	L		9		y	4	423.0	)9	
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedu for each category of Detailed Summary P	the (c	OR LINE NUMBER:     PAGE     77     OF     108       wheck only one)     11c     12       11a     11b     11c     12       13     14     15     16     17									
	y information copied from such Reports and Sta for commercial purposes, other than using the n				n for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC													
Α.	Full Name of Individual (Last, First, Middle Initia Sarfaty, Beth, R, Ms.,	l) or Full C	organization Name		Date of Receipt									
	Mailing Address 34 Wall Street				04 05 2019									
	City	State	Zip Code		Transaction ID : A2019-826018									
	West Long Branch	NJ	07764		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		]	38.47									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) Clinical Svcs & Quality M	gmt	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼			9.29										
в.	Full Name of Individual (Last, First, Middle Initia Sarfaty, Beth, R, Ms.,	l) or Full C	Prganization Name		Date of Receipt									
	Mailing Address 34 Wall Street				04 19 2019									
	City	State	Zip Code		Transaction ID : A2019-826581									
	West Long Branch	NJ	07764		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			38.47									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) Clinical Svcs & Quality M	lgmt	Memo Item									
	Receipt For:	Aggregate	Year-to-Date <b>V</b>											
	Primary General Other (specify) ▼		307	7.76										
с.	Full Name of Individual (Last, First, Middle Initia Schmidt, Megan, P, Ms.,	l) or Full C	organization Name		Date of Receipt									
	Mailing Address 204 Forest Lane North				01 / D D / Y Y Y Y 01 25 2019									
	City Blountville	State TN	Zip Code 37617	_	Transaction ID : A2019-45751									
	FEC ID number of contributing federal political committee.	C	37017	1	Amount of Each Receipt this Period 115.39									
	Name of Employer (for Individual)		upation (for Individual)		Memo Item									
	Select Medical Corporation		President											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify)			).78										
s	UBTOTAL of Receipts This Page (optional)			······ <b>&gt;</b>	192.33									

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         78         OF         108           (check only one)         I1a         11b         11c         12           I3         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Schmidt, Megan, P, Ms.,	l) or Full C	Drganization Name	Date of Receipt
	Mailing Address 204 Forest Lane North			02 08 / Y Y Y Y 02 08 2019
	City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-113369 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 346.17	
В.	Full Name of Individual (Last, First, Middle Initia Schmidt, Megan, P, Ms.,	l) or Full C	Drganization Name	Date of Receipt
-	Mailing Address 204 Forest Lane North			02 22 2019
	City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-327778 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.56	
	Full Name of Individual (Last, First, Middle Initia Schmidt, Megan, P, Ms.,	l) or Full C	Drganization Name	Date of Receipt
0.	Mailing Address 204 Forest Lane North			03 08 2019
	City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-521960 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 576.95	
s	UBTOTAL of Receipts This Page (optional)			▶ 346.17

FEC Schedule A (Form 3X) Rev. 06/2016

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         108           (check only one)         *         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	AC		
Full Name of Individual (Last, First, Middle I Schmidt, Megan, P, Ms.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 204 Forest Lane North			03 22 2019
City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-540450 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.39
Name of Employer (for Individual) Select Medical Corporation Receipt For:	Vice	upation (for Individual) e President	Memo Item
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]
Full Name of Individual (Last, First, Middle I B. Schmidt, Megan, P, Ms.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 204 Forest Lane North	1-		04 / D D / Y Y Y Y Y 2019
City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-826032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]
Full Name of Individual (Last, First, Middle I C. Schmidt, Megan, P, Ms.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 204 Forest Lane North			04 19 2019
City Blountville	State TN	Zip Code 37617	Transaction ID : A2019-826595 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	]
SUBTOTAL of Receipts This Page (optional)			346.17

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)										
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	name and a			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
A.	Full Name of Individual (Last, First, Middle Init Singer, Deborah, L, Mrs., Mailing Address 195 Honeybelle Oval City Chagrin Falls FEC ID number of contributing federal political committee. Name of Employer (for Individual) Select Medical Corporation Receipt For:	State OH C Occu Sen	upa nior '	Zip Code 44022 tion (for Individual) Vice President	Date of Receipt 01 25 2019 Transaction ID : A2019-45775 Amount of Each Receipt this Period 115.39 Memo Item							
	Full Name of Individual (Last, First, Middle Init		- <b>y</b> -	ar-to-Date ▼ 230.78 nization Name	]							
В.	Singer, Deborah, L, Mrs., Mailing Address 195 Honeybelle Oval	State		Zip Code	Date of Receipt 02 / 08 / 2019 Transaction ID : A2019-113393							
	Chagrin Falls FEC ID number of contributing federal political committee. Name of Employer (for Individual) Select Medical Corporation		•	tion (for Individual) Vice President	Amount of Each Receipt this Period  115.39  Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ , 346.17	]							
C.	Full Name of Individual (Last, First, Middle Init Singer, Deborah, L, Mrs., Mailing Address 195 Honeybelle Oval City Chagrin Falls	tial) or Full O	)rga	Zip Code	Date of Receipt 02 22 2019 Transaction ID : A2019-327762 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General Other (specify)	Seni	ior \	tion (for Individual) Vice President ar-to-Date ▼ 461.56	Memo Item							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       81       OF       108         (check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         X       11a       11b       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check only one)       Image: Check only one)         Image: Image: Check only one)       Image: Check only one)       Image: Check one)								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 195 Honeybelle Oval			M M / D D / Y Y Y Y Y 03 08 2019								
	City Chagrin Falls	State OH	Zip Code 44022	Transaction ID : A2019-521944 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		supation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95	]								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	Date of Receipt										
υ.	Mailing Address 195 Honeybelle Oval			03 22 2019								
	City Chagrin Falls	State OH	Zip Code 44022	Transaction ID : A2019-540435 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 195 Honeybelle Oval	State	Zip Code	04 / 05 / 2019								
	Chagrin Falls	OH	44022	Transaction ID : A2019-826017 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nor Vice President	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.73	1								
s	UBTOTAL of Receipts This Page (optional)			346.17								

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         82         OF         108           (check only one)         Image: Check only one in the image: Check on the imag								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Α.	Full Name of Individual (Last, First, Middle Initia Singer, Deborah, L, Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 195 Honeybelle Oval			M M / D D / Y Y Y Y Y 04 19 2019								
	City Chagrin Falls	State OH	Zip Code 44022	Transaction ID : A2019-826580 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]								
— R	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	Date of Receipt										
υ.	Mailing Address 1685 North 700 West			01 25 2019								
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-45773 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.78	]								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 1685 North 700 West	State	Zin Code	02 / D D / Y Y Y Y Y 02 08 2019								
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-113391 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.17	]								
s	UBTOTAL of Receipts This Page (optional)			346.17								

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         83         OF         108           (check only one)         *         11a         11b         11c         12           13         14         15         16         17						
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC									
Α.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	Date of Receipt								
	Mailing Address 1685 North 700 West	Chata	Zin Oodo	02 / D D / Y Y Y Y 02 22 2019						
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-327760						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 115.39						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56							
В.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Organization Name	Date of Receipt						
	Mailing Address 1685 North 700 West	M M / D D / Y Y Y Y 03 08 2019								
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-521942						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.95							
— c.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	al) or Full C	Organization Name	Date of Receipt						
	Mailing Address 1685 North 700 West	1		03 / D D / Y Y Y Y 03 22 2019						
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-540433						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.34							
s	UBTOTAL of Receipts This Page (optional)			▶ 346.17						

s line number only).....

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

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 84 OF 108 (check only one)									
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$									
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia Skinner, Gloria, J, Mrs.,	Date of Receipt											
	Mailing Address 1685 North 700 West			04 05 / Y Y Y Y 04 05 2019									
	City	State	Zip Code	Transaction ID : A2019-826015									
	Columbus	IN	47201	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
	Select Medical Corporation	Ser	nior Vice President										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		807.73	1									
	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name										
В.	Skinner, Gloria, J, Mrs.,		-	Date of Receipt									
	Mailing Address 1685 North 700 West			04 19 2019									
	City Columbus	State IN	Zip Code 47201	Transaction ID : A2019-826578 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Skinner, Jon, C, Mr.,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 5200 Topaz Ct			01 25 2019									
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-45762 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item									
	Receipt For:		Year-to-Date ▼	—									
	Primary General Other (specify)	- iggi ogale	230.78	1									
s	UBTOTAL of Receipts This Page (optional)			346.17									

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 85 OF 10									
IT	EMIZED RECEIPTS												
			for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
				13   14   15   16   17									
	y information copied from such Reports and Sta for commercial purposes, other than using the												
$\backslash$	NAME OF COMMITTEE (In Full)												
	Select Medical Corporation PAC												
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full C	rganization Name										
Α.	Skinner, Jon, C, Mr.,			Date of Receipt									
	Mailing Address 5200 Topaz Ct												
	City	State	Zip Code	02 08 2019									
	Flower Mound	TX	75022-8143	Transaction ID : A2019-113380									
		_		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
	Select Medical Corporation	Vice	e President										
	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Primary General		246.47	1									
	Other (specify) <b>v</b>		346.17	1									
	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Proanization Name										
В.	Skinner, Jon, C, Mr.,		nganization Name	Date of Receipt									
	Mailing Address 5200 Topaz Ct												
				02 22 2019									
	City	State	Zip Code	Transaction ID : A2019-327789									
	Flower Mound	ТХ	75022-8143	Amount of Each Receipt this Period									
	FEC ID number of contributing	С		115.39									
	federal political committee.												
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼	-									
	Primary General			1									
	Other (specify) ▼		461.56										
_	Full Name of Individual (Last First Middle 1997)		Numerication Name										
C.	Full Name of Individual (Last, First, Middle Initia Skinner, Jon, C, Mr.,	al) or Full C	rganization Name	Date of Receipt									
5.	Mailing Address 5200 Topaz Ct			M M / D D / Y Y Y Y									
	· .			03 08 2019									
	City	State	Zip Code	Transaction ID : A2019-521971									
	Flower Mound	TX	75022-8143	Amount of Each Receipt this Period									
	FEC ID number of contributing	С		115.39									
	federal political committee.												
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
	Select Medical Corporation	Vice	President										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General	_ · · ·	576.95	1									
	Other (specify)			1									
Г													
s	UBTOTAL of Receipts This Page (optional)			346.17									
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Other (specify)

Im	age# 201905099149657037			
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       86       OF       108         (check only one)       110       11c       12         112       14       15       16       17
	ny information copied from such Reports and s for commercial purposes, other than using the			13     14     15     16     17       berson for the purpose of soliciting contributions te to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Select Medical Corporation PA	С		
<u> </u>	Full Name of Individual (Last, First, Middle In Skinner, Jon, C, Mr.,	itial) or Full O	rganization Name	Date of Receipt
	Mailing Address 5200 Topaz Ct			03 22 2019
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-540461 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]
в.	Full Name of Individual (Last, First, Middle In Skinner, Jon, C, Mr., Mailing Address 5200 Topaz Ct	itial) or Full O	rganization Name	Date of Receipt
	City Flower Mound	State TX	Zip Code 75022-8143	04     05     2019       Transaction ID : A2019-826043       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]
C.	Full Name of Individual (Last, First, Middle In Skinner, Jon, C, Mr.,	itial) or Full O	rganization Name	Date of Receipt
	Mailing Address 5200 Topaz Ct			04 / D D / Y Y Y Y 04 19 2019
	City Flower Mound	State TX	Zip Code 75022-8143	Transaction ID : A2019-826567
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) President	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	1

SUBTOTAL of Receipts This Page (optional)		1	,		9	34	6.17	
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S	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 87 OF 108								
	, v		Use separate schedule(s)	FOR LINE NUMBER: PAGE 87 OF 108 (check only one)								
IL	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
_			Detailed Summary Faye	13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC											
Z	Full Name of Individual (Last, First, Middle Initia	I) or Full (	Organization Name									
Α.	Sloterbeek, Meridell, , Mrs.,			Date of Receipt								
	Mailing Address 164 E Dawn Dr			01 / 25 / 2019								
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-45742         Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.78									
В.	Full Name of Individual (Last, First, Middle Initia Sloterbeek, Meridell, , Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
υ.	Mailing Address 164 E Dawn Dr			02 08 2019								
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-113400 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.17									
<u> </u>	Full Name of Individual (Last, First, Middle Initia Sloterbeek, Meridell, , Mrs.,	l) or Full C	Drganization Name	Date of Receipt								
	Mailing Address 164 E Dawn Dr			M M / D D / Y Y Y Y 02 22 2019								
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-327769 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.39								
	Name of Employer (for Individual) Select Medical Corporation		supation (for Individual) e President	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)		461.56									
s	UBTOTAL of Receipts This Page (optional)			346.17								

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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       88       OF       108         (check only one)       I1a       11b       11c       12         13       14       15       16       17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC										
Α.	Full Name of Individual (Last, First, Middle Initia Sloterbeek, Meridell, , Mrs.,	Date of Receipt									
	Mailing Address 164 E Dawn Dr	03 08 2019									
	City	State	Zip Code	Transaction ID : A2019-521951							
	Tempe	AZ	85284-3160	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item							
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		576.95								
В.	Full Name of Individual (Last, First, Middle Initia Sloterbeek, Meridell, , Mrs.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 164 E Dawn Dr			03 22 2019							
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-540442 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) æ President	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34								
_	Full Name of Individual (Last, First, Middle Initia	al) or Full C									
C.	Sloterbeek, Meridell, , Mrs., Mailing Address 164 E Dawn Dr			Date of Receipt							
	City Tempe	State AZ	Zip Code 85284-3160	Transaction ID : A2019-826024 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.39							
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) e President	Memo Item							
	Receipt For:		Year-to-Date ▼	-							
	Primary General Other (specify)		807.73								
s	UBTOTAL of Receipts This Page (optional)			346.17							

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         89         OF         108           (check only one)         11a         11b         11c         12           11a         11b         11c         12         12									
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name of Individual (Last, First, Middle Initia Sloterbeek, Meridell, , Mrs.,	al) or Full (	Organization Name	Date of Receipt									
	Mailing Address 164 E Dawn Dr	04 / D D / Y Y Y Y 04 19 2019											
	City	State	Zip Code	Transaction ID : A2019-826587									
	Tempe	AZ	85284-3160	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) a President	Memo Item									
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General Other (specify) ▼		923.12										
В.	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	Organization Name	Date of Receipt										
	Mailing Address 3128 Mattatha Drive			01 25 2019									
	City	State	Zip Code	Transaction ID : A2019-45745									
	Bloomington	IN	47401	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.39									
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.78										
<u> </u>	Full Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	al) or Full (	Organization Name	Date of Receipt									
	Mailing Address 3128 Mattatha Drive			02 08 2019									
	City Bloomington	State IN	Zip Code 47401	Transaction ID : A2019-113403 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) Select Medical Corporation		cupation (for Individual) nior Vice President	Memo Item									
	Receipt For:		e Year-to-Date ▼										
	Primary General Other (specify)	Aggregate	346.17										
s	UBTOTAL of Receipts This Page (optional)			346.17									

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE (check only 11a 13		: PAG	E 90	2	108						
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the p		f soliciting	g contr	ibutior	าร				
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC	;											
<u> </u>	Full Name of Individual (Last, First, Middle Initi Streepy, Kurt, S, Mr.,	al) or Full O	organization Name	Date of	Receipt								
	Mailing Address 3128 Mattatha Drive			02 / Y Y Y Y 02 22 2019									
	City Bloomington	State IN	Zip Code 47401		action ID : of Each F								
	FEC ID number of contributing federal political committee.	С					1	15.39					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	]									
В.	Full Name of Individual (Last, First, Middle Initi Streepy, Kurt, S, Mr.,	al) or Full O	organization Name	Date of	Receipt								
	Mailing Address 3128 Mattatha Drive			03 08 2019									
	City	State	Zip Code	Transaction ID : A2019-521954									
	Bloomington	IN	47401	Amount	of Each F	Receipt th	nis Per	iod					
	FEC ID number of contributing federal political committee.	С			- <b>7</b> -		1	15.39					
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item									
	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Primary General Other (specify) ▼		576.95	]									
c.	Full Name of Individual (Last, First, Middle Initi Streepy, Kurt, S, Mr.,	al) or Full O	rganization Name	Date of	Receipt								
	Mailing Address 3128 Mattatha Drive	Ototo	Zin Onda	03									
	City Bloomington	State IN	Zip Code 47401		of Each F								
	FEC ID number of contributing federal political committee.	С			115.39								
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Me	emo Item								
_	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V 692.34	]									
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SUBTOTAL of Receipts This Page (optional)								346.17		
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	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       91       OF       108         (check only one)       I1a       11b       11c       12         I1a       14       15       16       17
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
N/	AME OF COMMITTEE (In Full) Select Medical Corporation PAC			
A	ull Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr.,	al) or Full C	rganization Name	Date of Receipt
_	ailing Address 3128 Mattatha Drive	Ctoto	Zin Codo	04 / 05 / Y Y Y Y 2019
Ci B	loomington	State IN	Zip Code 47401	Transaction ID : A2019-826027
FE	EC ID number of contributing deral political committee.	С		Amount of Each Receipt this Period 115.39
Se	ame of Employer (for Individual) elect Medical Corporation eceipt For: Primary General Other (specify) ▼	Ser	upation (for Individual) ior Vice President Year-to-Date ▼ 807.73	Memo Item
BS	III Name of Individual (Last, First, Middle Initia Streepy, Kurt, S, Mr., ailing Address 3128 Mattatha Drive	al) or Full C	rganization Name	Date of Receipt
Ci	ty	State	Zip Code	04 19 2019 Transaction ID : A2019-826590
FE	loomington EC ID number of contributing deral political committee.		47401	Amount of Each Receipt this Period
N Se	ame of Employer (for Individual) elect Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.12	]
	III Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	al) or Full C	organization Name	Date of Receipt
	ailing Address 9670 Rod Road			01 25 2019
Ci A	ty Ipharetta	State GA	Zip Code 30022	Transaction ID : A2019-45769 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		115.39
	ame of Employer (for Individual) elect Medical Corporation		upation (for Individual) ior Vice President	Memo Item
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.78	]
SUE	BTOTAL of Receipts This Page (optional)			346.17

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE         92         OF         108           (check only one)         I1a         11b         11c         12           X         11a         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC			
Α.	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	ll) or Full C	organization Name	Date of Receipt
	Mailing Address 9670 Rod Road			02 08 2019
	City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-113387 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation Receipt For: Primary General	Sen	upation (for Individual) ior Vice President Year-to-Date ▼	Memo Item
	Other (specify)		346.17	
B.	, , , ,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 9670 Rod Road			02 22 2019
	City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-327756 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.56	]
<u></u> С.	Full Name of Individual (Last, First, Middle Initia Williams, Brian, J, Mr.,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 9670 Rod Road			M M / D D / Y Y Y Y 03 08 2019
	City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-521938 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.39
	Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.95	]
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE       93       OF       108         (check only one)
Any information copied from such Reports and a or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	.C		
Full Name of Individual (Last, First, Middle Ir A. Williams, Brian, J, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 9670 Rod Road			M M / D D / Y Y Y Y 03 22 2019
City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-540429 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nor Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.34	]
Full Name of Individual (Last, First, Middle Ir B. Williams, Brian, J, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 9670 Rod Road		1	04 / D D / Y Y Y Y Y 2019
City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-826011 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) nior Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.73	]
Full Name of Individual (Last, First, Middle Ir C. Williams, Brian, J, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 9670 Rod Road			04 / D D / Y Y Y Y 2019
City Alpharetta	State GA	Zip Code 30022	Transaction ID : A2019-826574 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.39
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.12	]
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	y information copied from such Reports and Sta for commercial purposes, other than using the n								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC								
Α.	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	ll) or Full C	Organ	ization Name	Date c	of Receipt			
	Mailing Address 7 Martha Court				03	/ D D 15		2019	Y
	City	State PA		Zip Code 15317		saction ID : /			
	Canonsburg	FA		15317	Amour	t of Each Re	eceipt this	Period	
	FEC ID number of contributing federal political committee.	С						38.4	7
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) sident of Operations	N	lemo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year	-to-Date ▼ 230.82					
В.	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	l) or Full C	Organ	ization Name	Date c	of Receipt			
	Mailing Address 7 Martha Court				03	/ D D 29		2019	Y
	City Canonsburg	State PA		Zip Code 15317		saction ID : A			_
	FEC ID number of contributing federal political committee.	C						38.4	7
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) sident of Operations	N	lemo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year	-to-Date ▼ 269.29					
<u> </u>	Full Name of Individual (Last, First, Middle Initia Zanke, Christopher, V, Mr.,	l) or Full C	Organ	ization Name	Date c	of Receipt			
	Mailing Address 7 Martha Court				04	/ D D 12		2019	Y
	City Canonsburg	State PA		Zip Code 15317		saction ID :			
	FEC ID number of contributing federal political committee.	C			Amour	it of Each Re	eceipt this	Period 38.4	7
	Name of Employer (for Individual) Select Medical Corporation		•	on (for Individual) sident of Operations		lemo Item			
	Receipt For:	Aggregate	e Year	-to-Date 🔻					
	Other (specify)		7	307.76					
s	UBTOTAL of Receipts This Page (optional)							115.4	1

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         108           (check only one)         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Select Medical Corporation PA	AC		
Full Name of Individual (Last, First, Middle I A. Zanke, Christopher, V, Mr.,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 7 Martha Court			04 26 2019
City Canonsburg	State PA	Zip Code 15317	Transaction ID : A2019-826049 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.47
Name of Employer (for Individual) Select Medical Corporation		upation (for Individual) e President of Operations	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.23	]
Full Name of Individual (Last, First, Middle I B.	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	]
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name	
C. Mailing Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	]
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SCHEDULE B (FEC Form 3X)			F	OR L	INE 1	NUM	BER	:			PA	GE	96 OF	- 1
TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only	ly one)								
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NAME OF COMMITTEE (In Full)														
Select Medical Corporation PAC														
Full Name (Last, First, Middle Initial)						_								
Cory Gardner for Senate							ate of	f Dis	sburse		ent	Y Y	YY	
Mailing Address 9227 E. Lincoln Ave. #200-234							01		0	)7		20	019	
City Lone Tree	State CO	Zip Code 80124				FE	EC Id	enti	ficatio	n١	lumbe	r		
Purpose of Disbursement		00121	_	-		C	2	COC	04924	54				
Contribution			C	)11					1. A.	-	: B71	4308		
Candidate Name				egory	/	Ar							this Pe	eriod
Gardner, Cory, , ,			Ţ	ype		Г							2500.00	
	ement For: Primary	2020 General							7	_		4	-300.00	
President	Other (sp					Г	Me	mo	Item					
State: CO District:						Memo Item								
Full Name (Last, First, Middle Initial)	•							د <b>م</b> ا	- <b> -</b>					
B. McConnell Majority Leader Communication	nittee					_	ate of		sburse		=110			
Mailing Address 228 S. Washington St. Ste. 115								/	D	D 07			019	
City	State	Zip Code			-+		- - -	0.04	ficatio	n N	lumbo	r		
Alexandria	VA 22314							enti	ncatio	n P	lumbe		_	
Purpose of Disbursement Contribution	011						)	C00	)5486	51				
Candidate Name	011						Transaction ID : B714307							
				egory ype	/	Amount of Each Disbursement this Perio								eriod
Office Sought: House Disburs	ement For:	2019				5000.00								
Senate	Primary	General							1					
President	Other (sp	• ·				Memo Item								
State: District:		Not Applicab	le			_	1							
Full Name (Last, First, Middle Initial)						Da	ate of	f Dis	sburse	eme	ent			
							M M	/	D	D	/	Y Y	YY	
Mailing Address 16633 Ventura Blvd #1008							01		0	8	I L	20	019	
City	State	Zip Code				FF	EC Id	enti	ficatio	n١	lumbe	r		
Encino	CA	91436				172						-	-	
Purpose of Disbursement Contribution				)11		C			04581	-				
Candidate Name				-		Transaction ID : B714343 Amount of Each Disbursement this Perio							ariad	
Chu, Judy, , ,	Category/ Type					A	noun		Lacii	וט	spuise	anent	1115 26	51100
	ement For:	2020			$\neg$							ę	5000.00	
Senate	_	General				_					7			
President	Other (sp	ecify) 🔻					Me	mo	Item					
State: CA District: 27						_	1							
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SCHEDULE B (FEC Form 3X)			FOR LINE	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Stat or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) Select Medical Corporation PAC				
Full Name (Last, First, Middle Initial) A. NRSC				Date of Disbursement
Mailing Address 425 Second Street NE				01 08 2019
City Washington	State DC	Zip Code 20002		FEC Identification Number
Purpose of Disbursement Contribution Candidate Name			011	C C00027466 Transaction ID : B714344
	ement For:	2019	Category/ Type	Amount of Each Disbursement this Period 5000.00
Senate President	Primary	General ecify) ▼		Memo Item
State:         District:           Full Name (Last, First, Middle Initial)           B. Pascrell for Congress		Not Applicable		Date of Disbursement
Mailing Address PO Box 100				01 / D D / Y Y Y Y 2019
City Teaneck Purpose of Disbursement	State NJ	Zip Code 07666		FEC Identification Number
Contribution Candidate Name Pascrell, William, J, , Jr.			011 Category/ Type	Transaction ID : B714341 Amount of Each Disbursement this Period
Office Sought: K House Disburs	ement For: Primary Other (spe	General		5000.00
State: NJ District: 09		Sony)		Memo Item
Full Name (Last, First, Middle Initial) C. Pascrell for Congress				Date of Disbursement
Mailing Address PO Box 100				01 08 2019
City Teaneck Purpose of Disbursement	State NJ	Zip Code 07666		FEC Identification Number
Contribution Candidate Name			011 Category/	C C00313510 Transaction ID : B714342 Amount of Each Disbursement this Period
Senate	ement For: Primary	<b>x</b> General	Туре	5000.00
State: NJ District: 09	Other (spe	ecity) 🔻		Memo Item
SUBTOTAL of Disbursements This Page (optional)				15000.00

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)       Select Medical Corporation PAC         Full Name (Last, First, Middle Initial)       Date of Disbursement         A. Brady for Congress       Date of Disbursement         Mailing Address PO Box 8277       011         City       State       Zip Code         The Woodlands       TX       77387         Purpose of Disbursement       011       Category/         Contribution       011       Category/         Office Sought:       It House       Disbursement For: 2020         Senate       It Primary       General         Office Sought:       It House       Disbursement For: 2020         Senate       It President       Other (specify) ▼         Mailing Address 1751 Potomac Greens Drive       Merio Item         City       Mailing Address 1751 Potomac Greens Drive       FEC Identification Number         City       Mailing Address 1751 Potomac Greens Drive       FEC Identification Number         City       Mexandria       VA       Zip Code         Purpose of Disbursement       VA	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	parate schedule(s) a category of the I Summary Page	(check only 21b	22 🗶 23 🗌 26 🗌 27						
Select Medical Corporation PAC         Full Name (Last, First, Middle Initial)         A Brady for Congress         Mailing Address PO Box 8277         City         City         Contribution         Contribution         Category         Propose of Disbursement         Contribution         Category         Propose of Disbursement         Contribution         Category         Propose of Disbursement         Periods of Don Beyer         Mailing Address 1751 Potomac Greens Drive         City         Category         Propose of Disbursement         Contribution         Category         Propose of Disbursement         Contribution         Category         Propose of Disbursement         Contribution         Category         Mailing Address 1751 Potomac Greens Drive         City         Address PO Box 2485         City         State:       YA         Disbursement For:       2020         Propose of Disbursement       Cotegory         Total Cate, First, Middle Initia)       Cotegory         Purpose of Disbursem	or for commercial purposes, other than using the r	tements may name and add	not be sold or used dress of any politica	d by any perso I committee to	on for the purpose of soliciting contributions						
A. Brady for Congress       Date of Disbursement         Mailing Address PO Box 8277       01         City       Tx       Z7387         Purpose of Disbursement       011         Candidate Name       011         Candidate Name       011         Diffice Sought:       ¥ House         Office Sought:       ¥ House         Disbursement       Other (specify)         Full Name (Last, First, Middle Initial)         B. Friends of Don Beyer         Mailing Address       1731 Potomac Greens Drive         Citic       08         Contidate Name       011         Candidate Name       011         B. Friends of Don Beyer       Date of Disbursement         Mailing Address       1731 Potomac Greens Drive         Citics       011         Candidate Name       Disbursement For: 2020         Beyer, Don, , Jr.       Disbursement For: 2020         Controbution       011         Candidate Name       Disbursement For: 2020         State:       VA         State:       VA         Diffice Sought:       ¥ House         Other (specify)       Themary         General       Other (specify)	Select Medical Corporation PAC										
City       The Woodlands       Tx       Zip Code       77387         Purpose of Disbursement       Contribution       01       Coolidate Number       C Coolidate Number         Brady, Kevin, P.,       Office Sought:       X House       Disbursement For: 2020       Smount of Each Disbursement this Perior         State:       Transaction ID: 87/4573       Amount of Each Disbursement this Perior         State:       Tx       District:       06         President       President       Cher (specify) ▼         Full Name (Last, First, Middle Initial)       B.       Freinds of Don Beyer         Mailing Address 1751 Potomac Greens Drive       01       01       01         City       State       Zip Code       Coos55888       Transaction ID: 87/4573         Amount of Each Disbursement Contribution       011       Coos55888       Transaction ID: 87/4575         Contribution       011       Coos55888       Transaction ID: 87/4575         Contribution       011       Coos55888       Transaction ID: 87/4575         Contribution       01       Coos55888       Transaction ID: 87/4575         Contribution       01       Coos55888       Transaction ID: 87/4575         Contribution       01       Cood45279       Stoto 0	A. Brady for Congress										
Tx       7287         Purpose of Disbursement       011         Candidate Name       011         Brady, Kevin, P, ,       011         Office Sought:       ¥         Senate       Disbursement For: 2020         Y       Senate         Prevident       Office Sought:         Senate       Primary         General       Office Sought:         Pull Name (Last, First, Middle Initial)         B.       Friendes of Don Beyer         Mailing Address 1751 Potomac Greens Drive         City       State:         Alexandria       VA         Purpose of Disbursement       011         Candidate Name       011         Beyer, Don, , , , Jr.       011         Office Sought:       ¥         House       Disbursement For: 2020         Senate       Y         Prevident       Category/         Transaction D : B714575         Anount of Each Disbursement this Period         Office Sought:       ¥         House       Disbursement For: 2020         State:       VA         Full Name (Last, First, Middle Initial)         Charling Address PO Box 2485         City					01 10 2019						
Contribution       011         Candidate Name       011         Brady, Kevin, P, .       Transaction ID: B7/4573         Office Sought:       x         State:       TX         Pull Name (Last, First, Midel Initial)         B. Friends of Don Beyer         Mailing Address 1751 Potomac Greens Drive         City         Alexandria         Pulp Name (Last, First, Midel Initial)         B. Friends of Don Beyer         Mailing Address 1751 Potomac Greens Drive         City         Alexandria         Puip Name (Last, First, Midel Initial)         Contribution         Controlution         Controlution         Controlution         Controlution         Controlution         Controlution         Controlution         Controlution         Controlution         State:       VA         President         Y Primary         General         President         Y Primary         General         President         Y Primary         General         President         Y President <td< td=""><td></td><td></td><td></td><td></td><td>FEC Identification Number</td></td<>					FEC Identification Number						
Brady, Kevin, P, ,       Category       Andon's de Each Disbursement For: 2020         Office Sought:	Contribution			011							
Office Sought:       ¥       House Senate       Disbursement For: 2020 Y Primary       General Other (specify)       Memo item         State:       TX       District:       08         Friends of Don Beyer       Date of Disbursement Other (specify)       Date of Disbursement Other (specify)       Date of Disbursement         City       Mailing Address       1751 Potomac Greens Drive       Date of Disbursement Other (specify)       FEC Identification Number         City       State       Zip Code VA       Category/ Type       Transaction ID: B714575 Amount of Each Disbursement this Perior         Office Sought:       Y House President       Disbursement For: 2020       Memo item         State:       VA       Disbursement For: 2020       Memo item         Full Name (Last, First, Middle Initial)       Disbursement For: 2020       Memo item         Full Name (Last, First, Middle Initial)       Memo item       Date of Disbursement         City       Senate President       Primary       General Other (specify)       Date of Disbursement         City       Senate       Disbursement For: 2019       Code Senate       FEC Identification Number         City       Senate       Disbursement For: 2019       General Y Other (specify)       Transaction ID: B714571         Candidate Name       Disbursement For: 2019					Amount of Each Disbursement this Period						
State:       Tx       District:       08         Full Name (Last, First, Middle Initial)       B.       Friends of Don Beyer       Date of Disbursement         Mailing Address       1751 Potomac Greens Drive       01       10       2019         City       State       Zip Code       Zip Code       FEC Identification Number         Purpose of Disbursement       011       Candidate Name       Candidate Name       Candidate Name         Beyer, Don, , , Jr.       Office Sought:       Y Phouse       Disbursement For: 2020       5000.00         Office Sought:       Y Phouse       Disbursement For: 2020       5000.00         State:       VA       District:       08       011       Category/         State:       VA       District:       08       010       Memo Item         Full Name (Last, First, Middle Initial)       Category/       Date of Disbursement       01       10       2019         City       State       Zip Code       VA       22152       Purpose of Disbursement       Transaction ID : B714571         Amount of Each Disbursement For:       2019       Y       Y       Y       Y       Y         City       State       Zip Code       VA       Z2152       Y       Y <td>Office Sought: X House Disbur</td> <td>_ <u> </u></td> <td></td> <td>Туре</td> <td>5000.00</td>	Office Sought: X House Disbur	_ <u> </u>		Туре	5000.00						
B. Friends of Don Beyer       Date of Disbursement         Mailing Address 1751 Potomac Greens Drive       Disbursement         City       State       Zip Code         Alexandria       VA       2314         Purpose of Disbursement       Ontribution       Disbursement         Candidate Name       Disbursement For: 2020       FEC Identification Number         State:       VA       Disbursement For: 2020         Seyer, Don, , , Jr.       Other (specify)       Memo Item         State:       VA       Disbursement       Other (specify)         State:       VA       Zip Code       Date of Disbursement         Wailing Address PO Box 2485       Other (specify)       Date of Disbursement       Date of Disbursement         City       State       Zip Code       VA       Zip Code         Springfield       VA       Zip Code       Code45379       Transaction ID: B714571         Mount of Each Disbursement       Category/ Type       Transaction Number       Code45379       Transaction ID: B714571         Mount of Each Disbursement ID:       Other (specify)       Category/ Type       Memo Item       So00.00         Office Sought:       House       Disbursement For: 2019       Memo Item       So00.00         Of		Other (spe	ecify) 🔻		Memo Item						
City       Ataxandria       Zip Code       22314         Purpose of Disbursement       011       Candidate Name       011         Candidate Name       011       Category/       Transaction ID : B714575         Beyer, Don, , , Jr.       Office Sought:       X       House       Disbursement For: 2020         Office Sought:       X       House       Disbursement For: 2020       5000.00         State:       VA       Zip Code       Memo Item         Full Name (Last, First, Middle Initia)       Date of Disbursement       Date of Disbursement         City       State       Zip Code       22152         Purpose of Disbursement       011       Category/       Transaction ID : B714571         Mailing Address PO Box 2485       State       Zip Code       22152         City       State       VA       22152         Purpose of Disbursement       Other (specify)       Transaction ID : B714571         Candidate Name       Other (specify)       General       Memo Item         Office Sought:       House       Disbursement For: 2019       FEC Identification Number         Office Sought:       House       Disbursement For: 2019       Memo Item         State:       District:       Not Applicable	B. Friends of Don Beyer										
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Springfield       VA       22152         Purpose of Disbursement Contribution       011         Candidate Name       011         Candidate Name       011         Office Sought:       House         Disbursement For:       2019         President       Primary         State:       District:         Not Applicable	Mailing Address PO Box 2485										
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			Summary Page			21b 28a	22 	×	23 28c	2		30b			
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$\backslash$	NAME OF COMMITTEE (In Full)														
	Select Medical Corporation PAC														
_	Full Name (Last, First, Middle Initial)						Deta - 1			mert					
А.	Vern Buchanan for Congress						Date of	Dis			V	YY			
	Mailing Address PO Box 48928						01	ĺ	1	_		2019	T		
	City	State	Zip Code				FEC Ide	entif	ficatior	n Num	ber				
	Sarasota Purpose of Disbursement	FL	34230				0	000	1407	-0					
	Contribution			0	011		Ŭ		)41275	-					
	Candidate Name			_	egor	v/	Tra Amount			ID : B7 Disbur		-	Period		
	Buchanan, Vernon, , ,				ype	y'	, anount		Luon	Lisbul	Joine				
	Office Sought: 🗶 House Disburse	ment For: 2	2020						-			5000.0	00		
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	State: FL District: 16	Other (spec	city) 🔻				Mei	mo	Item						
_	Full Name (Last, First, Middle Initial)														
В.	Vote to Elect Republicans Now PA	٨C					Date of	Dis							
	Mailing Address 22780 Indidan Creek Drive Ste 100						01	<i>'</i>	D 1	_	Y =	2019	Ŷ		
	City	State	Zip Code				FEC Ide	entif	ficatior	n Num	ber				
	Dulles Purpose of Disbursement	VA	20166			_	C	<u></u>	43140	12		-			
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	Office Sought: House Disburse Senate	ment For: 2019							5000.0	00					
	President <b>x</b>	Primary Other (spec	General												
	State: District:	Childi (oper	Not Applicable				Memo Item								
	Full Name (Last, First, Middle Initial)														
C.	Beatty for Congress						Date of	Dis	sburse	ment					
	Mailing Addross, 202 East Town Street						м м 01	/	D 18	_		y y 2019	Y		
	Mailing Address 222 East Town Street Suite 2W						01	1			<u> </u>	2013			
	City	State	Zip Code				FEC Ide	əntif	ficatior	n Num	ber				
	Columbus	OH	43215					-				-			
	Purpose of Disbursement Contribution			0	)11		<b>U</b>		050736	-					
	Candidate Name				egory		Tra Amount			ID : B Disbur			Period		
	Beatty, Joyce, , ,				ype	y'	, anount		_4011	2.0000	55110				
	Office Sought: 🗶 House Disburse	ment For: 2	2020						,			5000.0	00		
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$\setminus$	NAME OF COMMITTEE (In Full)												
	Select Medical Corporation PAC												
Α.	Full Name (Last, First, Middle Initial) New Democrat Coalition PAC				Date of Disbursement								
	Mailing Address 700 13th Street NW #600				01 / 18 / 2019								
	City Washington	State DC	Zip Code 20005		FEC Identification Number								
	Purpose of Disbursement Contribution			011	C C00409730								
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
	Office Sought: House Disburse Senate	ement For: 2 Primary	2019 General		5000.00								
	State: District:	Other (spec	cify) ▼ Not Applicable		Memo Item								
_	Full Name (Last, First, Middle Initial)												
В.	The Markey Committee				Date of Disbursement								
	Mailing Address PO Box 120029				02 08 2019								
	City Boston	State MA	Zip Code 02112		FEC Identification Number								
	Purpose of Disbursement Contribution			011	C C00196774								
	Candidate Name			Category/	Amount of Each Disbursement this Period								
	Markey, Edward, J, , Office Sought: House Disburse	ement For:	2020	Туре	2500.00								
	x Senate x	1	General										
	State: MA District:	Other (spec	cify)		Memo Item								
C.	Full Name (Last, First, Middle Initial) Cory Gardner for Senate				Date of Disbursement								
	Mailing Address 9227 E. Lincoln Ave. #200-234				02 / 13 / Y Y Y Y 2019								
	City Lone Tree	State CO	Zip Code 80124		FEC Identification Number								
	Purpose of Disbursement Contribution			011	C C00492454 Transaction ID : B717516								
	Candidate Name Gardner, Cory, , ,			Category/ Type	Amount of Each Disbursement this Period								
	x Senate x	ement For: 2 Primary	General		1000.00								
_	State: CO District:	Other (spec	cify) 🔻		Memo Item								
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	y information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC												
Α.	Full Name (Last, First, Middle Initial) Alaskans for Dan Sullivan					Date o	_	burse		YY	YY		
	Mailing Address 3705 Arctic Blvd #447					02		1	9	_2	019		
	City Anchorage	State AK	Zip Code 99503			FEC lo	lentifi	catior	n Numbe	r			
	Purpose of Disbursement Contribution			011			1	57099 ction	94 ID : B71	7704			
	Candidate Name Sullivan, Dan, , ,			Catego Type		Amoun	it of E	Each	Disburse		t this Period		
	Office Sought:     House     Disburse       X     Senate     X       President     X	ement For: 2 Primary Other (spe	General				emo I	tom		į	5000.00		
	State: AK District: Full Name (Last, First, Middle Initial)							lem					
B.	Doug Jones for Senate Committee	e				Date c		D	D /		010		
	Mailing Address PO Box 131025			02		1	9	2	019				
	City Birmingham Purpose of Disbursement	State AL	Zip Code 35213				-	_	n Numbe	r	-		
	Contribution Candidate Name		C C00640623 Transaction ID : B717706 Amount of Each Disbursement this Perio										
	Jones, Doug, , ,       Office Sought:     House       X     Senate	ement For: ; Primary	5000.00										
	State: AL District:	Other (spec	Cify)			Memo Item							
C.	Full Name (Last, First, Middle Initial)					Date c	_						
	Mailing Address 425 Second Street NE					02	/	D 19			019		
	City Washington	State DC	Zip Code 20002			FEC lo	lentifi	catior	n Numbe	r	_		
	Purpose of Disbursement Contribution Candidate Name			011 Catego	ory/		ansa		ID : B71		t this Period		
	Office Sought: House Disburse Senate	ement For: 2	2019 General	Тур	e						5000.00		
	State: District:	Other (spec	cify) ▼ Not Applicable	•		Me	emo I	tem					
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Select Medical Corporation PAC										
Full Name (Last, First, Middle Initial) A. Seeking Justice Committee				Date of Disbursement						
	Mailing Address PO Box 131025									
City Birmingham	State AL	Zip Code 35213		FEC Identification Number						
Purpose of Disbursement Contribution			011	C C00666776						
Candidate Name			Category/ Type	Transaction ID : B717707 Amount of Each Disbursement this Period						
Office Sought: House Disbu	Primary	General	1900	5000.00						
State: District:	X Other (spe	Not Applicable		Memo Item						
Full Name (Last, First, Middle Initial) B. Perimeter PAC Mailing Address 124 Washington Street Ste 101				Date of Disbursement						
City Foxboro	State MA	Zip Code 02035		FEC Identification Number C C00544254 Transaction ID : B718109 Amount of Each Disbursement this Period						
Purpose of Disbursement Contribution Candidate Name			011 Category/ Type							
Senate President	rsement For: Primary X Other (spe			5000.00 Memo Item						
State: District: Full Name (Last, First, Middle Initial)		Not Applicable								
C. Tammy for Illinois				Date of Disbursement						
	Mailing Address PO Box 10793									
City Chicago Purpose of Disbursement Contribution	State IL	Zip Code 60610	011	FEC Identification Number C C00574889 Transaction ID : B718108 Amount of Each Disbursement this Period						
Candidate Name Duckworth, Tammy, , ,			Category/ Type							
Office Sought: House Disbur Senate President State: IL District:	rsement For: Primary Other (spe	<b>x</b> General		5000.00 Memo Item						
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$\square$	NAME OF COMMITTEE (In Full)															
	Select Medical Corporation PAC															
A.	Full Name (Last, First, Middle Initial) Together Everyone Realizes Real	Impact F	Impact PAC							Date of Disbursement						
	Mailing Address 499 S Capitol STreet SW Ste 404		1				02 26 2019									
	City	State DC	Zip Code				FEC I	dent	ificatic	on	Num	ber				
	Washington Purpose of Disbursement Contribution	DC	20003	(	)11		С	1.0	05250	-	1					
	Candidate Name				egor ype	y/	Transaction ID : B718131 Amount of Each Disbursement this Period									
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B.	Full Name (Last, First, Middle Initial) Aftab for Ohio						Date of Disbursement									
	Mailing Address PO Box 713								02 28 2019							
	City Cincinnati	State OH	Zip Code 45201				FEC Identification Number									
	Purpose of Disbursement Contribution		(	011	٦	C C00667519 Transaction ID : B706454										
	Candidate Name		Cat	egor	y/							nt this	Period			
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	Office Sought: X House Disburse Senate	Disbursement For: 2018 Primary X Gener							-			,	- 2500.			
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с.	Full Name (Last, First, Middle Initial) Cory Booker for Senate						Date	of Di	isburs	en	nent					
	Mailing Address PO Box 15293							02 / D D / Y Y Y Y 28 2019								
	City Washington	State DC						FEC Identification Number								
	Purpose of Disbursement Contribution	(	)11		С		05405	_		67090	26					
	Candidate Name Booker, Cory, , ,	egor ype	y/	Transaction ID : B679866 Amount of Each Disbursement this Period												
	Office Sought: House Disburse							-				- 2500.	00			
	★     Senate       President     ✓       Other (specify)     ▼							emo	Item	0	/oide 2/02/		jinal ch	eck date	d	
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SCHEDULE B	(FEC Form 3X)			FOR LINE	NUMBER: PAGE 104 OF 108				
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					on for the purpose of soliciting contributions solicit contributions from such committee.				
	. ,								
Select Medica	al Corporation PAC								
Full Name (Last, Fi	rst, Middle Initial)				Date of Disbursement				
Mailing Address 430 2n	0 S. Capitol St. SE d Fl				02 28 2019				
City Washington		State DC	Zip Code 20003		FEC Identification Number				
Purpose of Disburse Contribution	ement		20003	011	C C00000935				
Candidate Name				Category/ Type	Transaction ID : B683538 Amount of Each Disbursement this Period				
Office Sought:	House Disburse Senate President X	ement For: 2 Primary Other (spe	General		- 5000.00 Voided: Original check dated				
State:	District:		Not Applicable	•	Memo Item 03/27/18				
Full Name (Last, Fin B. Keystone Am Mailing Address PC	erica PAC				Date of Disbursement				
City Philadephia Purpose of Disburse	amont	State PA	Zip Code 19102		FEC Identification Number				
Contribution	ution			011 Category/ Type	C C00439992 Transaction ID : B722639 Amount of Each Disbursement this Period				
Office Sought:	House Disburse Senate President X	ement For: Primary Other (spe	General		2500.00				
State:	District:		Not Applicable	9	Memo Item				
Full Name (Last, Fi	rst, Middle Initial) ctory Committee				Date of Disbursement				
Mailing Address 22 Ste	8 S Washington St e 115		03 05 2019						
City Alexandria		State VA	Zip Code 22314		FEC Identification Number				
Purpose of Disburse Contribution Candidate Name	ement			011	C C00638007 Transaction ID : B729344				
		Category/ Type	Amount of Each Disbursement this Period 25000.00						
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IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check c	-	one)	Г	~	23	Г	26		27	
			Summary Page			22		×	23 28c	╞	20	$\vdash$	30b	
Δr	y information copied from such Reports and State	ments may r	not be sold or use					h		of	_	na c		
or	for commercial purposes, other than using the na	me and addr	ress of any politica	al committee	e to	solicit	cont	trib	ution	s i	from si	ich c	committee.	
$\backslash$	NAME OF COMMITTEE (In Full)													
$\backslash$	Select Medical Corporation PAC													
_	Full Name (Last, First, Middle Initial)	- ·			Data	- 4								
А.	Citizens for Prosperity in America		Date of Disbursement											
	Mailing Address 228 S Washington St Ste 115					03 / 06 / Y Y Y Y 2019								
	City Alexandria	State VA	Zip Code 22314			FEC	lde	ntif	icatio	n	Numbe	ər		
	Purpose of Disbursement	•••	22314			С	C	200	4916	354	4		-	
	Contribution			011				_			1.00	3320		
	Candidate Name			Category/ Type	1	Transaction ID : B723329 Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For: 2	2019	туре	_	<b>—</b>							5000.00	1
	Senate	Primary	General								46			
	President X	Other (spec	• • •				Men	no	Item					
	State: District:		Not Applicable											
B.	Full Name (Last, First, Middle Initial) Bonnie Watson Coleman for Congress						Date of Disbursement							
	Bonnie Watson Coleman for Cong	JIESS												
	Mailing Address 918 Pennsylvania Ave SE							03 15 2019						
	City	State		FEC Identification Number										
	Washington Purpose of Disbursement	DC	20003									-		
	Contribution			011		С	-	_	5584		1.00			
	Candidate Name			Category/		Transaction ID : B725085 Amount of Each Disbursement this Period								
	Coleman, Bonnie Watson, , ,			Type		7 1110	unt		Laon			Sinoi		1
	° <b>^</b>	1						_	,				1000.00	J.
	Senate x	Primary Other (spec	General			-								
	State: NJ District: 12		Siry)				Men	no	Item					
	Full Name (Last, First, Middle Initial)													
C.	Josh Gottheimer for Congress							Date of Disbursement						
	Mailing Address DO Day 504				_	03 15 2019								
	Mailing Address PO Box 584					0	3			15			2019	
	City	State	Zip Code		+	FFC	Ide	ntif	icatio	n	Numb	ər		
	Ridgewood Purpose of Disbursement	NJ	07451			FEC Identification Number								
	Contribution			011	11	С			)5739		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	Candidate Name		4						D: B72		<b>4</b> It this Period			
	Gottheimer, Josh, , ,	Category/ Type			um		Lach		51350113					
		ment For: 2							,				1000.00	
	Senate x	Primary	General			_								
	State: NJ District: 05	Other (spec	city) 🔻				Men	no	Item					
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s	UBTOTAL of Disbursements This Page (optional).												7000.00	
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Т	OTAL This Period (last page this line number only	/)		····· •			_	_	,	4				

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	-		28a	22         X         23         26         27           28b         28c         29         30b						
or for commercial purposes, other than using the nar										
NAME OF COMMITTEE (In Full) Select Medical Corporation PAC										
Full Name (Last, First, Middle Initial) A. Mikie Sherrill for Congress Mailing Address PO Box 43032				Date of Disbursement						
	State NJ	Zip Code 07043		FEC Identification Number						
Purpose of Disbursement Contribution			011	C C00640003 Transaction ID : B725086						
Sherrill, Rebecca, M, ,	ment For: 2 Primary Other (spe	General	Category/ Type	Amount of Each Disbursement this Period						
State:       NJ       District:       11         Full Name (Last, First, Middle Initial)       B.       Van Drew for Congress         Mailing Address       PO Box 671				Date of Disbursement						
Cape May Court House Purpose of Disbursement Contribution Candidate Name Van Drew, Jeff, , ,	State NJ ment For:	Zip Code 08210	011 Category/ Type	FEC Identification Number C C00661868 Transaction ID : B725082 Amount of Each Disbursement this Period 1000.00						
State: NJ District: 02	Primary Other (spe	General cify)		Memo Item						
Full Name (Last, First, Middle Initial) C. Terri Sewell for Congress Mailing Address PO Box 1964				Date of Disbursement						
Birmingham	State AL	Zip Code 35201		FEC Identification Number						
Purpose of Disbursement Contribution Candidate Name Sewell, Terri, , ,	011 Category/ Type	C C00458976 Transaction ID : B726311 Amount of Each Disbursement this Period								
Office Sought: Senate President State: AL District: 07	ment For: 2 Primary Other (spe	<b>x</b> General		5000.00 Memo Item						

	CHEDULE B (FEC Form 3X)								
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	y one) 22 <b>X</b> 23 26 27 28b 28c 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full) Select Medical Corporation PAC								
A.	Full Name (Last, First, Middle Initial) Fred Keller for Congress	Date of Disbursement							
	Mailing Address 23 N Derr Dr Ste 2	04 15 2019							
	City Lewisburg	State PA	Zip Code 17837		FEC Identification Number				
	Purpose of Disbursement Contribution		17037	011	C C00697052 Transaction ID : B728502				
	Candidate Name Keller, Fred, , ,			Category/ Type	Amount of Each Disbursement this Period				
		ement For: Primary	2019 General		2500.00				
	State: PA District: 12	Other (spe	ecify) ▼ Special Genera	ıl	Memo Item				
_	Full Name (Last, First, Middle Initial)								
Β.	Shaheen For Senate	Date of Disbursement							
	Mailing Address PO Box 75357								
	City Washington		FEC Identification Number						
	Purpose of Disbursement Contribution			011	C C00457325 Transaction ID : B728703 Amount of Each Disbursement this Period				
	Candidate Name Shaheen, Jeanne, , ,			Category/ Type					
		ement For:	2020	Type	2500.00				
	XSenatePresident	Primary Other (spe	General ecify)		Memo Item				
	State: NH District: Full Name (Last, First, Middle Initial)								
C.	Silk PAC	Date of Disbursement							
	Mailing Address PO Box 286		04 18 2019						
	City Caldwell		FEC Identification Number						
	Purpose of Disbursement Contribution		011	C C00432765 Transaction ID : B728704					
	Candidate Name	Amount of Each Disbursement this Period							
	Office Sought: House Disburse Senate President		5000.00						
	State: District:	Other (spe	Not Applicable		Memo Item				
s	UBTOTAL of Disbursements This Page (optional).			····· •	10000.00				
т	OTAL This Period (last page this line number only	/)							

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 28a							
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)									
Select Medical Corporation PAC									
Full Name (Last, First, Middle Initial) A. Together We Rise Mailing Address 16633 Ventura Blvd #1008			Date of Disbursement						
	State Zip Code CA 91436	011 Category/	FEC Identification Number C C00667360 Transaction ID : B728705 Amount of Each Disbursement this Period						
State: District:	nent For: 2019 Primary General Other (specify) ▼ Not Applicable	Туре	5000.00 Memo Item						
Full Name (Last, First, Middle Initial) B. Team McHenry Mailing Address 228 S Washington St Ste 115			Date of Disbursement						
City Alexandria Purpose of Disbursement Contribution Candidate Name	State Zip Code VA 22314	011 Category/	FEC Identification Number C C00544650 Transaction ID : B729000 Amount of Each Disbursement this Period						
Office Sought: House Disburser Senate President X State: District:	nent For: 2020 Primary General Other (specify) Not Applicable	Туре	1000.00 Memo Item						
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement						
City Purpose of Disbursement	State Zip Code		FEC Identification Number						
Candidate Name	Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disburser Senate President District:	nent For: Primary General Other (specify) ▼		Memo Item						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			6000.00 148500.00						