

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00414649
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 01 2007 through 10 31 2007

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

Type or Print Name of Treasurer Tyler C. Murphy

Signature of Treasurer Electronically Filed by Tyler C. Murphy Date 11 16 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		13459.92
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	7847.51									
(c) Total Receipts (from Line 19)	5026.69	39238.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12874.20	52698.20								
7. Total Disbursements (from Line 31)	9510.00	49334.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3364.20	3364.20								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4798.84	27674.50
(i) Itemized (use Schedule A)	227.85	11563.78
(ii) Unitemized	5026.69	39238.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5026.69	39238.28
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5026.69	39238.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5026.69	39238.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10.00	84.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	10.00	84.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	49250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9510.00	49334.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	9510.00	49334.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5026.69	39238.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5026.69	39238.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	84.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10.00	84.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. James A Allen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 436 Golf Drive		Transaction ID: SA11A1.7637
City Hoover	State AL	Zip Code 35226
Amount of Each Receipt this Period 57.00		Payroll Deduction (\$28.50, 2 weeks)
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation VP Operations Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 627.00	

Full Name (Last, First, Middle Initial) B. Ken Anthony		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address 734 10th Street		Transaction ID: SA11A1.7613
City Oakmont	State PA	Zip Code 15139
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Christine Bachrach		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 3725 Dunbarton Drive		Transaction ID: SA11A1.7639
City Mountain Brook	State AL	Zip Code 35223
Amount of Each Receipt this Period 50.00		Payroll Deduction (\$25, 2 weeks)
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation VP Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) ▶	607.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jeffrey P Blackwood		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 276 Stonebridge Rd		Transaction ID: SA11A1.7643	
City Birmingham	State AL	Zip Code 35210	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30, 2 weeks)	
Name of Employer HealthSouth	Occupation VP - Design and Construction		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

Full Name (Last, First, Middle Initial) B. Charles Byrd, III		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 3609 Ridgecrest Road		Transaction ID: SA11A1.7644	
City Birmingham	State AL	Zip Code 35223	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)	
Name of Employer HealthSouth	Occupation VP Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) C. Randall Carpenter		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 3754 Carisbrooke Drive		Transaction ID: SA11A1.7645	
City Hoover	State AL	Zip Code 35226	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40, 2 weeks)	
Name of Employer HealthSouth	Occupation Chief Information Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

SUBTOTAL of Receipts This Page (optional)	180.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Dr. Dexanne B. Clohan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 235 Cahaba River Parc		Transaction ID: SA11A1.7646	
City Birmingham	State AL	Zip Code 35243	Amount of Each Receipt this Period 384.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$192, 2 weeks)	
Name of Employer HealthSouth	Occupation Chief Medical Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4224.00		

Full Name (Last, First, Middle Initial) B. Kevin R Conn		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7	
Mailing Address 10456 N.W. 48th Manor		Transaction ID: SA11A1.7629	
City Coral Springs	State FL	Zip Code 33076	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)	
Name of Employer HealthSouth	Occupation Vice President - Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) C. Kristen DeHart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 1542 Canterbury Ln		Transaction ID: SA11A1.7648	
City Liberty	State MO	Zip Code 64068	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	464.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Elaine Ebaugh		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7	
Mailing Address 4331 38th Way S.		Transaction ID: SA11A1.7630	
City State Zip Code St Petersburg FL 33711	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)		
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Cynthia Eiseman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
Mailing Address 4197 Gun Club Road		Transaction ID: SA11A1.7618	
City State Zip Code Murrysville PA 15668	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$75, 2 weeks)		
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Laurie English		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 904 Emerald Blvd		Transaction ID: SA11A1.7650	
City State Zip Code Southlake TX 76902	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Payroll deduction (\$75, 2 weeks)		
Name of Employer HealthSouth Occupation Senior VP - Inpatient Operations	Aggregate Year-to-Date ▼ 1650.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Tracy Foy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
Mailing Address 3612 Rockhill Road		Transaction ID: SA11A1.7616	
City Birmingham	State AL	Zip Code 35223	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Vice President of ITG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Brenda Gosney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7	
Mailing Address 968 Nagel Road		Transaction ID: SA11A1.7631	
City Butler	State KY	Zip Code 41006	Amount of Each Receipt this Period 36.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00		
		Payroll Deduction (\$12, 2 weeks)	

Full Name (Last, First, Middle Initial) C. Jerry Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 7130 East Saddleback St Apt. 56		Transaction ID: SA11A1.7651	
City Mesa	State AZ	Zip Code 85207	Amount of Each Receipt this Period 112.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Senior VP Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00		
		Payroll Deduction (\$56, 2 weeks)	

SUBTOTAL of Receipts This Page (optional) ▶	648.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Susan Heath		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
Mailing Address PO Box 2192		Transaction ID: SA11A1.7617	
City Brentwood	State TN	Zip Code 37024	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Healthcare Facility Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. William Andrew Heath		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 3409 Watertown Place		Transaction ID: SA11A1.7653	
City Birmingham	State AL	Zip Code 35243	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Director of Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00		
		Payroll Deduction (\$19, 2 weeks)	

Full Name (Last, First, Middle Initial) C. Wayne Hegwood		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 2356 Altadena Crest Drive		Transaction ID: SA11A1.7654	
City Birmingham	State AL	Zip Code 35242	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer HealthSouth	Occupation Director of Special Projects		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction (\$10, 2 weeks)	

SUBTOTAL of Receipts This Page (optional) ▶	308.00
TOTAL This Period (last page this line number only) ▶	

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

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

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

Full Name (Last, First, Middle Initial) A. Jill Jordan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 443 Lee Road 2099		Transaction ID: SA11A1.7655
City State Zip Code Phenix City AL 36870	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David Klementz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 808 Parkview Circle		Transaction ID: SA11A1.7656
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 116.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$58, 2 weeks)	
Name of Employer HealthSouth Occupation CFO - Inpatient Division	Aggregate Year-to-Date ▼ 1276.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carol Lynne Lee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 1811 Martin St So		Transaction ID: SA11A1.7657
City State Zip Code Pell City AL 35128	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth Occupation Director of Risk Management	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	156.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial) Robert Paul Livingston Mailing Address 1504 SW 8th Ave City Topeka State KS Zip Code 66606 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.7658 Amount of Each Receipt this Period 20.00 Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

B. Full Name (Last, First, Middle Initial) Terry R Maxhimer Mailing Address 4817 Wood Springs Ln City Birmingham State AL Zip Code 35226 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.7659 Amount of Each Receipt this Period 150.00 Payroll Deduction (\$75, 2 weeks)
Name of Employer HealthSouth Occupation SVP Inpatient Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1650.00		

C. Full Name (Last, First, Middle Initial) Denise B McGrath Mailing Address 222 River Walk Dr City Melbourne Beach State FL Zip Code 32951 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 7 Transaction ID: SA11A1.7633 Amount of Each Receipt this Period 30.00 Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

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

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

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

Full Name (Last, First, Middle Initial) A. Mary K Moscato		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 22 Andrews Rd		Transaction ID: SA11A1.7660
City State Zip Code Wakefield MA 01882	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20, 2 weeks)	
Name of Employer HealthSouth Occupation Senior VP Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) B. Patricia Ostaszewski		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 54 Bay Way Drive		Transaction ID: SA11A1.7661
City State Zip Code Brick NJ 08723	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25, 2 weeks)	
Name of Employer HealthSouth Occupation VP Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) C. Shawn Patzkowsky		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 133 Narrows Peak Circle		Transaction ID: SA11A1.7662
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10, 2 weeks)	
Name of Employer HealthSouth Occupation Director of Income Tax Compliance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial) Gary Payne Mailing Address 2401 N Slick Rock City State Zip Code Columbia MO 65202 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.7663 Amount of Each Receipt this Period 40.00 Payroll Deduction (\$20, 2 weeks)
Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00		

B. Full Name (Last, First, Middle Initial) Kimberly Pretnar Mailing Address 5528 Afton Dr City State Zip Code Birmingham AL 35242 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.7664 Amount of Each Receipt this Period 38.00 Payroll Deduction (\$19, 2 weeks)
Name of Employer HealthSouth Occupation Director of Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 418.00		

C. Full Name (Last, First, Middle Initial) Mark J Rice Mailing Address 182 Jill Loop City State Zip Code Ruston LA 71270 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.7665 Amount of Each Receipt this Period 20.00 Payroll Deduction (\$10, 2 weeks)
Name of Employer HealthSouth Occupation Healthcare Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		

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

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

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

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

Full Name (Last, First, Middle Initial) A. Mark J Tarr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 1039 Williams Trace		Transaction ID: SA11A1.7667
City Birmingham	State AL	Zip Code 35242
Amount of Each Receipt this Period 76.00		Payroll Deduction (\$38, 2 weeks)
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation President - Inpatient Division	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.00	

Full Name (Last, First, Middle Initial) B. Sandra Kaye Vollman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 2908 Glenstone Circle		Transaction ID: SA11A1.7668
City Birmingham	State AL	Zip Code 35242
Amount of Each Receipt this Period 80.00		Payroll Deduction (\$40, 2 weeks)
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation Senior VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) C. Linda Masone Wilder		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 2335 Ridge Trail		Transaction ID: SA11A1.7669
City Birmingham	State AL	Zip Code 35242
Amount of Each Receipt this Period 76.00		Payroll Deduction (38, 2 weeks)
FEC ID number of contributing federal political committee. C		
Name of Employer HealthSouth	Occupation Senior VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.00	

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

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

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

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

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

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

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

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1692.24

Date of Receipt
10 / 24 / 2007

Transaction ID: SA11A1.7670

Amount of Each Receipt this Period
153.84

Payroll Deduction (\$76.92, 2 weeks)

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

Mailing Address 656 Bluff Park Road

City Hoover State AL Zip Code 35226

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

Name of Employer HealthSouth Occupation Director, Contract Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
10 / 24 / 2007

Transaction ID: SA11A1.7671

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$10, 2 weeks)

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

Mailing Address 7054 North Highfield Dr

City Birmingham State AL Zip Code 35242

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

Name of Employer HealthSouth Occupation CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1694.00

Date of Receipt
10 / 24 / 2007

Transaction ID: SA11A1.7673

Amount of Each Receipt this Period
154.00

Payroll Deduction (\$77, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	327.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Russell Yeager		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 628 Springbank Terrace		Transaction ID: SA11A1.7674	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19, 2 weeks) 418.00		
Name of Employer HealthSouth Occupation VP Technology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		418.00	

Full Name (Last, First, Middle Initial) B. Shirley H. Yoshida		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7	
Mailing Address 4520 Marden Way		Transaction ID: SA11A1.7615	
City State Zip Code Birmingham AL 35242	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	1000.00		
Name of Employer HealthSouth Occupation Senior VP, Inspector General	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		1000.00	

SUBTOTAL of Receipts This Page (optional)	1038.00
TOTAL This Period (last page this line number only)	4798.84

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 20

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

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

Full Name (Last, First, Middle Initial) A. COMMITTEE TO RE-ELECT ARTUR DAVIS TO CONGRESS, THE		Transaction ID: SB23.7624 Date of Disbursement
Mailing Address PO Box 1845		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Birmingham	State AL	Zip Code 35201
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name ARTUR G DAVIS		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: AL	District: 7	

Full Name (Last, First, Middle Initial) B. FRIENDS OF BLANCHE LINCOLN		Transaction ID: SB23.7620 Date of Disbursement
Mailing Address PO BOX 3197		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City LITTLE ROCK	State AR	Zip Code 72203
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name BLANCHE LAMBERT LINCOLN		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: AR	District: 00	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JAY ROCKEFELLER		Transaction ID: SB23.7623 Date of Disbursement
Mailing Address PO BOX 1909		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City CHARLESTON	State WV	Zip Code 25327
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name JOHN DAVISON IV ROCKEFELLER		<input type="text" value="2500.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: WV	District: 00	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

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

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

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOHN TANNER		Transaction ID: SB23.7621 Date of Disbursement																				
Mailing Address Post Office Box 1994 Post Office Box 1994		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	1	/	2	0	0	7													
City Union City	State TN	Zip Code 38281																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name JOHN S. TANNER		<table border="1"><tr><td colspan="10">500.00</td></tr></table>	500.00																			
500.00																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: TN District: 08	Category/Type																					

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN TANNER		Transaction ID: SB23.7622 Date of Disbursement																				
Mailing Address Post Office Box 1994 Post Office Box 1994		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	1	/	2	0	0	7													
City Union City	State TN	Zip Code 38281																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name JOHN S. TANNER		<table border="1"><tr><td colspan="10">2500.00</td></tr></table>	2500.00																			
2500.00																						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: TN District: 08	Category/Type																					

Full Name (Last, First, Middle Initial) C. PAT ROBERTS		Transaction ID: SB23.7625 Date of Disbursement																				
Mailing Address BOX 15		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	6	/	2	0	0	7													
City DODGE CITY	State KS	Zip Code 67801																				
Purpose of Disbursement		Amount of Each Disbursement this Period																				
Candidate Name PAT ROBERTS		<table border="1"><tr><td colspan="10">2000.00</td></tr></table>	2000.00																			
2000.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: KS District: 00	Category/Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td colspan="10">5000.00</td></tr></table>	5000.00									
5000.00											
TOTAL This Period (last page this line number only)	<table border="1"><tr><td colspan="10">9500.00</td></tr></table>	9500.00									
9500.00											