

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Encompass Health Corporation Political Action Committee

ADDRESS (number and street) **9001 Liberty Parkway**
 Check if different than previously reported. (ACC) **Birmingham** **AL** **35242**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C **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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
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 / / 2017 through / / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Fay, Edmund, M., ,
Type or Print Name of Treasurer

Signature of Treasurer *Fay, Edmund, M., ,* [Electronically Filed] Date / / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Encompass Health Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="15528.58"/>	<input type="text" value="15528.58"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15986.44"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6736.26"/>	<input type="text" value="68460.58"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="22722.70"/>	<input type="text" value="83989.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14000.00"/>	<input type="text" value="75266.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8722.70"/>	<input type="text" value="8722.70"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Encompass Health Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6068.76	48213.08
(ii) Unitemized	667.50	20247.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6736.26	68460.58
(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)	6736.26	68460.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6736.26	68460.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6736.26	68460.58

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	72500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	875.00
(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	875.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1891.46
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14000.00	75266.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14000.00	75266.46

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6736.26	68460.58
34. Total Contribution Refunds (from Line 28(d))	0.00	875.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6736.26	67585.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. Adams, Steven, Charles, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 Louanis Drive

City Reading	State MA	Zip Code 01867
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional Marketing Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28457

Amount of Each Receipt this Period
60.00

Memo Item
Payroll Deduction (\$20, 2 weeks)

B. Armstrong, Justin, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2402 Briarhill Court

City White Oak	State PA	Zip Code 15131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Health Information Management Direct
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28460

Amount of Each Receipt this Period
60.00

Memo Item
Payroll Deduction (\$20, 2 weeks)

C. Bennett, Tony, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3108 Preserve Rookery Boulevard

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hospital Administrator
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28463

Amount of Each Receipt this Period
60.00

Memo Item
Payroll Deduction (\$20, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Berry, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 Central Street
 City North Reading State MA Zip Code 01864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Managed Care Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28464
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

B. Bitner, Gretchin, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20421 Anchor Circle
 City Huntington Beach State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Therapy Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28465
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

C. Braz, Marcus, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8291 Deerbrook Circle
 City Sarasota State FL Zip Code 34238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28466
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction (\$25, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Brewer, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5030 Iroquois Drive
 City Frisco State TX Zip Code 75034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28467
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

B. Brown, Jr., Frank, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24507 Old Windmill Trail
 City Hockley State TX Zip Code 77447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28468
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll Deduction (\$40, 2 weeks)

C. Brown, Terrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5217 Meadow Garden Lane
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Healthsouth Corporation Occupation (for Individual) Regional Operations Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28469
 Amount of Each Receipt this Period 57.00
 Memo Item
 Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	217.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Buck, Phylis, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 6939
 City Texarkana State TX Zip Code 75505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28470
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Burton, Luanne, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 Providence Road
 City Leesville State SC Zip Code 29070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28472
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Byrd, Charles, Richard, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3609 Ridgcrest Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) National Real Estate Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28473
 Amount of Each Receipt this Period 72.00
 Memo Item
 Payroll Deduction (\$24, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	147.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Cole, Georgeanne, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 8341

City Gray	State TN	Zip Code 37615
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hospital Administrator
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28475

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$10, 2 weeks)

B. Conn, Kevin, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6192 NW 88th Avenue

City Parkland	State FL	Zip Code 33067
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional Operations Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28476

Amount of Each Receipt this Period
60.00

Memo Item
Payroll Deduction (\$20, 2 weeks)

C. Darby, John, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3115 Overhill Road

City Birmingham	State AL	Zip Code 35223
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) General Counsel
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28478

Amount of Each Receipt this Period
300.00

Memo Item
Payroll Deduction (\$100, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	390.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Daughtry, Morris, Chris, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 Maultrie Square
 City Anderson State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Therapy Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28479
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Dedecker, Troy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 Falmouth
 City Fairway State KS Zip Code 66205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28480
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction (\$50, 2 weeks)

C. Devaney, Catherine, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Buckingham Drive
 City Bow State NH Zip Code 03304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28481
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Ewing, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 Hancock Road

City Bellefonte	State PA	Zip Code 16823
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Marketing Operations Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28484

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Fay, Edmund, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 Valley Road

City Birmingham	State AL	Zip Code 35206
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Senior Vice President and Treasurer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2158.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28485

Amount of Each Receipt this Period
 249.00

Memo Item
 Payroll Deduction (\$83, 2 weeks)

C. Feuer, Tammy, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 North Woodland Avenue

City Woodbury	State NJ	Zip Code 08096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hospital Administrator
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28486

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	309.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. Filler, Scott, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Ruskin Drive
 City Altoona State PA Zip Code 16602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28487
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Gray, Jerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7130 East Saddleback Street Apt. 56
 City Mesa State AZ Zip Code 85207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2706.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28489
 Amount of Each Receipt this Period 168.00
 Memo Item
 Payroll Deduction (\$56, 2 weeks)

C. Grayson, Katherine, Eubanks, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3791 Montevallo Road South
 City Birmingham State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28491
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Hansford, Joye, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3513 Meadowbrook Circle

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) National Creative Services Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28492

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$10, 2 weeks)

B. Hardin, Nicholas, David, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24014 Clover Trails

City Katy	State TX	Zip Code 77494
--------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hospital Administrator
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28494

Amount of Each Receipt this Period
57.00

Memo Item
Payroll Deduction (\$19, 2 weeks)

C. Hardy, Kevin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1230 Buckhead Drive SW

City Vero Beach	State FL	Zip Code 32968
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Controller
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28495

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	117.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 34
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. House, William, Bernard, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1739 Lake Cyrus Club Drive

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional Controller
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28498

Amount of Each Receipt this Period
105.00

Memo Item
Payroll Deduction (\$35, 2 weeks)

B. Hunter, Justin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5221 42nd Street NW

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Public Policy, Legislation & Regulatio
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28499

Amount of Each Receipt this Period
120.00

Memo Item
Payroll Deduction (\$40, 2 weeks)

C. Jacobsmeyer, Barbara, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3908 Herman's Lake Court

City Florissant	State MO	Zip Code 63034
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional President
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28500

Amount of Each Receipt this Period
288.00

Memo Item
Payroll Deduction (\$96, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	513.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Johnston, Gregory, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 Gardener Road
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Marketing Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28501
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Jones, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 East Chestnut Avenue Unit G 64
 City Vineland State NJ Zip Code 08361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Marketing Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28502
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Kennedy, Robert, Bradford, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 Compton Road
 City Cincinnati State OH Zip Code 45215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28504
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Kindle, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 Aberlady Place
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Information Technology Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28506
 Amount of Each Receipt this Period 114.00
 Memo Item
 Payroll Deduction (\$38, 2 weeks)

B. Kirkland, James, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 County Road 1060
 City Clanton State AL Zip Code 35045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Print Services Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28507
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Klementz, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 Parkview Circle
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Operations Senior Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1508.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28509
 Amount of Each Receipt this Period 174.00
 Memo Item
 Payroll Deduction (\$58, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	318.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Kronenberg, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8743 West Tierra Buena Lane
 City Peoria State AZ Zip Code 85382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Pharmacy Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28510
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Laffey, Leah, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 Elm Spring Road
 City Pittsburgh State PA Zip Code 15243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28511
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

C. Leasure, Stephen, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 Shades Crest Road
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Senior Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28513
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Lee, Carol, Lynne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2217 2nd Ave North

City Birmingham	State AL	Zip Code 35203
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) National Risk Management Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28514

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Leech, Robert, Eugene, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4032 Milner Way

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) National Home Health Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28515

Amount of Each Receipt this Period
 90.00

Memo Item
 Payroll Deduction (\$30, 2 weeks)

C. Loggins, Phillip, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5022 McLaughlin Drive

City Tallahassee	State FL	Zip Code 32309
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional Quality/Risk Director
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA11AI.28516

Amount of Each Receipt this Period
 45.00

Memo Item
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 34
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. Mantegazza, Peter, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 Madeline Drive

City Ridgefield	State CT	Zip Code 06877
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Regional President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28517

Amount of Each Receipt this Period
114.00

Memo Item
Payroll Deduction (\$38, 2 weeks)

B. McCallum, Robert, Warren, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3405 Watertown Place

City Vestavia Hills	State AL	Zip Code 35243
------------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Chief Tax Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
988.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28518

Amount of Each Receipt this Period
114.00

Memo Item
Payroll Deduction (\$38, 2 weeks)

C. McGrath, Denise, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 River Walk Drive

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hopsital Administrator
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.28519

Amount of Each Receipt this Period
45.00

Memo Item
Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	273.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. McGuire, Matthew, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8470 Carrington Lakes Cove
 City Trussville State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Information Technology Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28520
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Moore, Monnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 904 Southpoint Circle
 City Morgantown State WV Zip Code 26501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Pharmacy Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28521
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Morales, Wanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 Chapelwood Drive
 City Dothan State AL Zip Code 36303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Quality/Risk Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28522
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. Mowen, Ed, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 Highlands Drive
 City Trussville State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28523
 Amount of Each Receipt this Period 300.00
 Memo Item
 Payroll Deduction (\$100, 2 weeks)

B. Munyan, Lori, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1799 Slocum Avenue
 City Wall State NJ Zip Code 07719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28524
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Murvin, Sandra, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2858 Canterbury Road
 City Birmingham State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Deputy General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28525
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction (\$50, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	480.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Ostaszewski, Patricia, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 Bay Way

City Brick	State NJ	Zip Code 08723
---------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Hospital Administrator
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28526

Amount of Each Receipt this Period
90.00

Memo Item
Payroll Deduction (\$30, 2 weeks)

B. Poynter, William, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1202 Berwick Road

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) National Talent Acquisition Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28528

Amount of Each Receipt this Period
50.00

Memo Item
Payroll Deduction (\$25, 2 weeks)

C. Price, Andrew, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 72 Nolen Street

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) Chief Accounting Officer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28529

Amount of Each Receipt this Period
150.00

Memo Item
Payroll Deduction (\$50, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Rosene, Robert, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9747 West Vandeventor Drive
 City Littleton State CO Zip Code 80128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Human Resources Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28531
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Rosetta, Kevin, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 Detroit Avenue
 City Nederland State TX Zip Code 77627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Pharmacy Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28532
 Amount of Each Receipt this Period 57.00
 Memo Item
 Payroll Deduction (\$19, 2 weeks)

C. Santel, Steve, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12005 Wesford Drive
 City Maryland Heights State MO Zip Code 63043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Managed Care Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28534
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	132.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 34
	<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)
Encompass Health Corporation Political Action Committee

A. Schoel, Will, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 Craft Lane
 City Hoover State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Organization Development Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28535
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Shafer, Kathleen, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1827 Sentry Oak Court
 City Orange Park State FL Zip Code 32003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Chief Nursing Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28536
 Amount of Each Receipt this Period 75.00
 Memo Item
 Payroll Deduction (\$25, 2 weeks)

C. Skripps, Michele, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 Pine Ridge Drive
 City Belton State SC Zip Code 29627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28537
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$20, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Smith, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 Ashford Circle

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

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) National Internal Audit Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28539

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$10, 2 weeks)

B. Smith, Walter, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 Broadway Street

City Birmingham	State AL	Zip Code 35209
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HealthSouth Corporation	Occupation (for Individual) State Regulatory Affairs Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28540

Amount of Each Receipt this Period
45.00

Memo Item
Payroll Deduction (\$15, 2 weeks)

C. Spain, Carol, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 783 Scout Creek Trail

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

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

Name of Employer (for Individual) Healthsouth Corporation	Occupation (for Individual) Regional Managed Care Director
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : SA11AI.28541

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 34
	<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)
Encompass Health Corporation Political Action Committee

A. Spencer, Karen, Christmas, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 Oakleaf Circle
 City Bessemer State AL Zip Code 35022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Tax Operations & Accounting Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28542
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

B. Steward, Kimberly, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Folklore Court
 City The Woodlands State TX Zip Code 77389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28543
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

C. Summerville, Darla, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 Piper Street
 City Lilly State PA Zip Code 15938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Occupation (for Individual) Certified Case Management Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28544
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Taggart, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 704 Guardbridge Court
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Inspector General
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28545
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Terry, Sheila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 Wisteria Dr.
 City Chelsea State AL Zip Code 35043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28546
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

C. Traylor, Curtis, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3307 Waters Edge
 City Manvel State TX Zip Code 77578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Pharmacy Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28547
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll Deduction (\$12, 2 weeks)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34
	<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)
Encompass Health Corporation Political Action Committee

A. Treadway, Michael, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1884 West Holly Trail
 City Hawkins State TX Zip Code 75570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28548
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll Deduction (\$30, 2 weeks)

B. Turman, Tracy, Penn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16313 Hampton Glen Lane
 City Chesterfiled State VA Zip Code 23832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28549
 Amount of Each Receipt this Period 42.00
 Memo Item
 Payroll Deduction (\$14, 2 weeks)

C. Wells, Tricia, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 Southpointe Drive
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) National Human Resources Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28551
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	162.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Encompass Health Corporation Political Action Committee

A. Wilder, Linda, Masone, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2335 Ridge Trail
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Regional President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28552
 Amount of Each Receipt this Period 210.00
 Memo Item
 Payroll Deduction (\$70, 2 weeks)

B. Willey, Donn, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1932 River Woods Road
 City Hoover State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) National Compensation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28553
 Amount of Each Receipt this Period 57.00
 Memo Item
 Payroll Deduction (\$19, 2 weeks)

C. Wilson, Arthur, E., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) HealthSouth Corporation Occupation (for Individual) Chief Real Estate Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1999.92

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28554
 Amount of Each Receipt this Period 230.76
 Memo Item
 Payroll Deduction (\$76.92, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	497.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Wilson, John, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 Monaghan Drive
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Managed Care Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28555
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Wiseman, James, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9349 Ansley Lane
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Tax Planning Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28556
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

C. Wisner, Robert, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 Eagle Lake Circle
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Reimbursement Senior Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2017
Transaction ID : SA11AI.28557
 Amount of Each Receipt this Period 114.00
 Memo Item
 Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional).....	219.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 34
<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)
Encompass Health Corporation Political Action Committee

A. Wittig, William, Forrest, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3969 Haddon Circle
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Operations Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **12 / 31 / 2017**
Transaction ID : SA11AI.28558
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction (\$15, 2 weeks)

B. Yeager, Russell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1348 Saddlecreek Parkway
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthSouth Corporation Occupation (for Individual) Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1018.00

Date of Receipt **12 / 31 / 2017**
Transaction ID : SA11AI.28559
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll Deduction (\$40, 2 weeks)

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.00
TOTAL This Period (last page this line number only).....	6068.76

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

Encompass Health Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. ARKANSAS FOR LEADERSHIP POLITICAL ACTION COMMITTEE (ARKPAC)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	5		2	0	1	7		

Mailing Address PO BOX 1672

FEC Identification Number

C C00413948

Transaction ID : SB23.28562

Amount of Each Disbursement this Period

2500.00

Memo Item

City

ALEXANDRIA

State

VA

Zip Code

22313

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. BILL NELSON FOR U S SENATE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	5		2	0	1	7		

Mailing Address 500 RED SAIL WAY

FEC Identification Number

C C00344051

Transaction ID : SB23.28561

Amount of Each Disbursement this Period

2500.00

Memo Item

City

SATELITE BEACH

State

FL

Zip Code

32937

Purpose of Disbursement

Category/Type

Candidate Name

NELSON, BILL, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: FL

District: 00

Full Name (Last, First, Middle Initial)

C. DEVIN NUNES CAMPAIGN COMMITTEE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	5		2	0	1	7		

Mailing Address PO BOX 6545

FEC Identification Number

C C00370056

Transaction ID : SB23.28565

Amount of Each Disbursement this Period

2000.00

Memo Item

City

VISALIA

State

CA

Zip Code

93290

Purpose of Disbursement

Category/Type

Candidate Name

NUNES, DEVIN G, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CA

District: 22

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

7000.00

TOTAL 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 NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

Encompass Health Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City
BOWLING GREEN

State
KY

Zip Code
42102

Purpose of Disbursement

Candidate Name

GUTHRIE, S. BRETT HON., , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2017			

FEC Identification Number

C C00445023

Transaction ID : SB23.28566

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MCCONNELL FOR MAJORITY LEADER COMMITTEE

Mailing Address 228 S WASHINGTON ST STE 115

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement

Candidate Name

MCCONNELL, MITCH, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: KY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2017			

FEC Identification Number

C C00548651

Transaction ID : SB23.28560

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RELY ON YOUR BELIEFS FUND

Mailing Address 209 Pennsylvania Avenue SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2017			

FEC Identification Number

C C00344648

Transaction ID : SB23.28564

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7000.00

14000.00
