

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

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

FOR LINE NUMBER: PAGE 19 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Encompass Health Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Hester, Amber, , ,**

Mailing Address 2060 Mauvilla Cove

City
Biloxi

State
MS

Zip Code
39531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Encompass Health Corporation

Occupation (for Individual)
Hospital Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2019

Transaction ID : SA11AI.31387

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction (\$20, 2 Week)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **House, William, Bernard, , III**

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)
Encompass Health Corporation

Occupation (for Individual)
Regional Controller Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2019

Transaction ID : SA11AI.31390

Amount of Each Receipt this Period

105.00

☐ Memo Item

Payroll Deduction (\$35, 2 weeks)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Hunter, Justin, , ,**

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)
Encompass Health Corporation

Occupation (for Individual)
Public Policy, Legislation & Reg. SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2019

Transaction ID : SA11AI.31391

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction (\$40, 2 weeks)

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

265.00

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