

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

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

FOR LINE NUMBER: PAGE 8 OF 15  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Encompass Health Corporation Political Action Committee**

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

**A. Gooch, Mathew, , ,**

Mailing Address 7 Adams Way

City

Lincoln University

State

PA

Zip Code

19352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Encompass Health Corporation

Occupation (for Individual)

Area Hospital Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11AI.30411

Amount of Each Receipt this Period

80.00

☐

Memo Item

Payroll Deduction (\$40, 2 Weeks)

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

**B. Gray, Jerry, , ,**

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)

Encompass Health Corporation

Occupation (for Individual)

Regional President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11AI.30413

Amount of Each Receipt this Period

112.00

☐

Memo Item

Payroll Deduction (\$56, 2 weeks)

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

**C. 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2019

Transaction ID : SA11AI.30422

Amount of Each Receipt this Period

70.00

☐

Memo Item

Payroll Deduction (\$35, 2 weeks)

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

262.00

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