PAGE 1 / 69

Image# 11972754146

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office	Use Only	
1.	NAME OF COMMITTEE (in		PE OR P	RINT ▼		mple: If typi r the lines.	ng, type	12FE4	1M5		
K	indred Health	care, Inc.	PAC								
Ш											
ADI	DRESS (number and		680 S. Fo	urth St.							
H	Check if diffe	erent									
L	than previous reported. (AC		Louisville					KY	402	202	
2.	FEC IDENTIFIC	ATION NUME	BER ▼	С	ITY 🛦			STATE A		ZIP CO	DE 🛦
	C C0024227	1		3.	IS THIS REPORT		NEW (N) OR		AMENDE (A)	:D	
4.	TYPE OF REP (Choose One)	ORT	(b) Mont	ort L	eb 20 (M2)		May 20 (M5)		Aug 20 (Ma	3)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Rep	oorts:	Due	Mi	ar 20 (M3)		Jun 20 (M6)		Sep 20 (Ms	9) ×	Dec 20 (M12) (Non-Election Year Only)
	April 15			Ap	or 20 (M4)		Jul 20 (M7)		Oct 20 (M1	0)	Jan 31 (YE)
	Quarterly July 15	Report (Q1)	(c)	12-Day		Primary (12F	P)	Ger	eral (12G)		Runoff (12R)
	Quarterly	Report (Q2)		PRE -Election Report for the:	П	Convention	(12C)	Spe	cial (12S)		
	October Quarterly	15 Report (Q3)							, ,		
	January Year-End	31 I Report (YE)		Elect	tion on	M = M /	D D /	Y W Y W Y	Y	in the State o	of
	July 31 I Report (I Year Onl	Non-election	(d)	30-Day POST-Election Report for the:		General (30	G)	Run	off (30R)		Special (30S)
	Terminat (TER)	ion Report		·	tion on	M = M /	D D /	Y = Y = Y	Y	in the State o	of
5.	Covering Period	11	/ 01	2011	Y	through	11 __	30		2011	
l ce	ertify that I have ex	camined this F	Report ar	nd to the best of	of my kno	wledge and	belief it is tru	ue, correc	t and comp	olete.	
Тур	e or Print Name o	f Treasurer	Hank Rob	pinson							
Sig	nature of Treasure	Hank Rol	oinson			[Electronical]	y Filed] [20/	2011
NO.	TE: Submission of f	alse, erroneou	s, or inco	mplete informati	ion may su	bject the per	son signing t	his Report	to the pen	alties of 2	U.S.C. §437g.
	Office								FE	C FOR	RM 3X
	Use									Rev. 12/2	

O FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Kindred Healthcare, Inc. PAC		
Report Covering the Period: From:	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011	[71255.22
(b) Cash on Hand at Beginning of Reporting Period	85244.23	
(c) Total Receipts (from Line 19)	9944.00	180433.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	95188.23	251688.23
7. Total Disbursements (from Line 31)	16500.00	173000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	78688.23	78688.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This committee has qualified as a multican	didate committee. (see FEC FORM 1M)	
F	or 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Kiliuleu neallicale, ilic.	dred Healthcare, Inc	. PAC
----------------------------	----------------------	-------

ort Covering the Period: From: 11	01 2011	To: 11 30 2011
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
Than Political Committees		* * * * * * * * * * * * * * * * * * * *
(i) Itemized (use Schedule A)	8613.00	119144.30
		10000 00
. ,	1331.00	49399.20
	0044.00	168543.50
Lines II(a)(i) and (ii)	9944.00	100043.30
Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	9944.00	168543.50
arty Committees	0.00	9889.51
II Loans Received	0.00	0.00
oan Repayments Received	0.00	0.00
	7	7
- · · · · · · · · · · · · · · · · · · ·		
Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
Federal Candidates and Other		
	0.00	2000.00
· · · · · · · · · · · · · · · · · · ·		
	0.00	0.00
· ·	0.00	0.00
(0.00
a) Lovin Funds (from Schodule UE)	0.00	0.00
D) Levill Fullus (IIUIII Schedule HS)	7	0.00
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(i) Itemized (use Schedule A)	a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period		
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Calendar Year-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
	200	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	0.00	0.00	
Expenditures	0.00	0.00	
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00	
Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Contributions to Federal Candidates/Committees			
and Other Political Committees	16500.00	167000.00	
Independent Expenditures	0.00	0.00	
(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(dae ochodale i)			
Loan Repayments Made	0.00	0.00	
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	0.00	0.00	
/h) Political Porty Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(such as PACs)	0.00	0.00	
(626) 26 17166)	7		
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
Other Disbursements	0.00	6000.00	
Federal Election Activity (2 U.S.C. §431(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	2.22	0.00	
With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16500.00	173000.00	
	7		
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	16500.00	173000.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	9944.00	168543.50
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9944.00	168543.50
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER: **PAGE** 6 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Roderick J Cowgill Date of Receipt Mailing Address 9103 Lantern Lite Pkwy 30 2011 City Zip Code State Transaction ID: PR1094115423163 KY Louisville 40220 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Name of Employer Occupation VP Facilities Mgmt-HD Kindred Healthcare. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. John R Stephenson II Date of Receipt Mailing Address 1111 Cliffwood Drive 11 30 2011 City State Zip Code Transaction ID: PR1094170123163 KY Goshen 40026 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Fac Mgmt-HD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Teresa S Anderson Date of Receipt Mailing Address 7115 Coachwood Drive 30 2011 City Zip Code State Transaction ID: PR1094183723163 IN Georgetown 47122 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr Dir Fin Sys Dev Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF 69 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and S or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC							
Full Name (Last, First, Middle Initial) Edward L Kuntz			Date of Receipt				
Mailing Address 8807 Stable Crest Boulevard City	State	Zip Code	11 30 2011 Transaction ID : PR1094183923163				
Houston	TX	77024	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		200.00				
Name of Employer	Occupation						
Kindred Healthcare Inc. Receipt For:	Chairman c		_				
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2300.00	P/R Deduction (\$100.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial) 3. David R Windhorst			Date of Receipt				
Mailing Address 2000 Spring Farms Road			11 30 2011				
City	State	Zip Code	Transaction ID: PR1094185023163				
Floyds Knobs	IN	47119	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		80.00				
Name of Employer Kindred Healthcare Inc.	Occupation VP Financia						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial) Lawrence I Wolf			Date of Receipt				
Mailing Address 4826 N Winthrop Ave #3S			11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Chicago	State IL	Zip Code 60640	Transaction ID : PR1094185123163 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		40.00				
Name of Employer	Occupation						
Kindred Healthcare Inc.	Health Info	Tech Strateg					
Receipt For: Primary General	Aggregate	Year-to-Date ▼	B/B B I i i (face on B) W II)				
Other (specify) ▼		460.00	P/R Deduction (\$20.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)		·····	320.00				
TOTAL This Period (last page this line number of	only)	>					

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14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Mary Jane Frappier-Neff Date of Receipt Mailing Address 2883 Bellwind Circle 30 2011 City State Zip Code Transaction ID: PR1094185223163 FL Rockledge 32955 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Sr Dir Reg IS Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Katheryn J Markham Date of Receipt Mailing Address 10602 Taylor Farm Ct 30 11 2011 City State Zip Code Transaction ID: PR1094185623163 KY 40059 Prospect Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. VP IS Planning&FieldSvcs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$45.00 Bi-Weekly) 1035.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dan McReynolds Date of Receipt Mailing Address 7620 Beech Spring Court 30 2011 City Zip Code State Transaction ID: PR1094185723163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr Dir Fin Sys Dev Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

FOR LINE NUMBER: **PAGE** 9 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Catherine A Gooch Date of Receipt Mailing Address 14516 Clear Meadow Court 30 2011 City Zip Code State Transaction ID: PR1094185923163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Sr Dir Fin Sys Dev Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patrick J Gillenwater Date of Receipt Mailing Address 402 Erin Drive 11 30 2011 City State Zip Code Transaction ID: PR1094186423163 IN Jeffersonville 47130 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir IS Administration Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$17.50 Bi-Weekly) 402.50 Other (specify) Full Name (Last, First, Middle Initial) c. Mona Euler Date of Receipt Mailing Address 12568 Sandstone Run 30 2011 City Zip Code State Transaction ID: PR1094186723163 IN Carmel 46033 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Occupation Name of Employer Chief Exec Off I Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

FOR LINE NUMBER: PAGE 10 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) William B Seibert Date of Receipt Mailing Address 4706 Wolfcreek Pkwy 30 2011 City State Zip Code Transaction ID: PR1094187423163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation Sr Dir Fin Sys Dev Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Bi-Weekly) 690.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles Wardrip Date of Receipt Mailing Address 2805 Chestnut Ridge Place 30 11 2011 City State Zip Code Transaction ID: PR1094187923163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. VP IS Ops & Telecomm Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$45.00 Bi-Weekly) 845.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen M Dobler Date of Receipt Mailing Address 1106 Holly Springs Drive 30 2011 City Zip Code State Transaction ID: PR1094188023163 KY Louisville 40242 Amount of Each Receipt this Period FEC ID number of contributing 90.00 С federal political committee. Name of Employer Occupation VP IS Finance & Admin Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$45.00 Bi-Weekly) 1035.00 Other (specify) 240.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 11 OF 69 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Terry Carrico Mailing Address 3011 Wolf Lair Court City New Albany	State Zip Code IN 47150	Date of Receipt 11 30 2011 Transaction ID: PR1094188223163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation Sr Dir Clin Systems Dev Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Steven J Paynter Mailing Address 3105 Crestmoor Court		Date of Receipt 11 30 2011
City Prospect	State Zip Code KY 40059	Transaction ID : PR1094188423163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation Sr Cnslt Tech Arch Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. Kimberly Ann Beach Mailing Address, 6645 Loland Priva		Date of Receipt
Mailing Address 6615 Leland Drive City	State Zip Code	11 30 2011 Transaction ID : PR1094188623163
Crestwood FEC ID number of contributing federal political committee.	KY 40014	Amount of Each Receipt this Period 20.00
Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation VP Operation Sys-NCD Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b		11c	12	
		ago		13		14		15	16	17
Any information copied from such Reports and St or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC										
Full Name (Last, First, Middle Initial) A. William R Rhodes										
Mailing Address 11303 Vista Greens Drive				M = M	′		30	/ Y	2011	Y
City	State KY	Zip Code		Trans	acti	ion II	D : P	R10941	889231	63
Louisville	- Ki	40241	_ A	mount	of	Each	n Red	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С				_	7		7	20	0.00
Name of Employer	Occupation									
Kindred Healthcare Inc.	Cnslt Tech	Architec								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		230.00	P/I	R Dedu	uctio	on (\$	10.00) Bi-We	ekly)	
Full Name (Last, First, Middle Initial) 3. Martin Ardron			Date of Receipt							
Mailing Address 41 La Sierra Dr.				M = M	/		30	/ Y	2011	Υ
City	State	Zip Code		Transa	acti	on IE) : P	R10941	8912316	3
Phillips Ranch	CA	91766	A	mount	of	Each	n Red	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С					7		,	50	0.00
Name of Employer Kindred Healthcare Inc.	Occupation Div VP Hos	o Rehab-RHB								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼	, igg. oguto	575.00	P/F	R Dedu	uctic	on (\$2	25.00) Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. Michael Metzger			D	ate of	Re	ceipt				
Mailing Address 129 Foley Rd				м - м 11	/		30	/ Y	2011	Y
City West Point	State VA	Zip Code 23181							893231	
	٧٨	23101	A	mount	of	Each	n Red	ceipt th	is Period	i
FEC ID number of contributing federal political committee.	С					7	_	7	3	0.00
Name of Employer	Occupation		\exists							
Kindred Healthcare Inc.	Chief Fin O	ff III								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		345.00	P/I	R Ded	uctio	on (\$	15.0	0 Bi-W€	eekly)	
SUBTOTAL of Receipts This Page (optional)						7		- 1	100	0.00
TOTAL This Period (last page this line number of	only)					7		-		

	FOR	LINE	NU	MBER	:	PAGE	 13 OF	-	69
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
_ common common, cogo		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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Jan Turk Date of Receipt Mailing Address 1314 Amelia St. 30 2011 City State Zip Code Transaction ID: PR1094190023163 **New Orleans** LA 70115 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Resource CEO HD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Larry Foster Date of Receipt Mailing Address 1134 W. Granville Avenue Unit 815 30 11 2011 City State Zip Code Transaction ID: PR1094190323163 IL Chicago 60660 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Chief Exec Off III Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 600.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jack Shapiro Date of Receipt Mailing Address 22591 Covington Drive 30 2011 City State Zip Code Transaction ID: PR1094190423163 IL Deer Park 60010 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Division VP-HD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 1200.00 Other (specify) 190.00 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of Detailed Summary P	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Adrienne Lyons Mailing Address 1220 North Oak Park Avenue		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ook Pork	State Zip Code IL 60302	Transaction ID : PR1094190523163
Oak Park FEC ID number of contributing federal political committee.	IL 60302	Amount of Each Receipt this Period 20.00
Kindred Healthcare Inc.	Occupation teg SrDir Clinical Ops-HD Aggregate Year-to-Date ▼	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Linda Mcquade Mailing Address 4712 Sw 24 Ave		Date of Receipt
City Ft Lauderdale FEC ID number of contributing	State Zip Code FL 33312	Transaction ID : PR1094191023163 Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation	20.00
Receipt For:	Igr Health Info Mgmt Aggregate Year-to-Date ▼ 24	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Theodore Welding		Date of Receipt
Mailing Address 2448 Middle River Dr.	7. 0.4	11 30 / Y Y Y Y Y Y
City Ft. Lauderdale	State Zip Code FL 33305	Transaction ID : PR1094191323163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
	executive Director I	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$25.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number on	γ)	

FOR LINE NUMBER: PAGE 15 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Sean R Muldoon Date of Receipt Mailing Address 239 Fairfax Avenue 30 2011 City State Zip Code Transaction ID: PR1094192223163 KY Louisville 40207 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Sr VP & Chief Med Off-HD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Bi-Weekly) 3300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah R Doddridge Date of Receipt Mailing Address 312 Hill Street NW 30 11 2011 City State Zip Code Transaction ID: PR1094193023163 IN Depauw 47115 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Procure Sys & Capital Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joel W Day Date of Receipt Mailing Address 2017 Spring Farms Drive 30 2011 City Zip Code State Transaction ID: PR1094193123163 IN Floyds Knobs 47119 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Occupation Name of Employer VP & Controller-HD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Bi-Weekly) 450.00 Other (specify) 290.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 16 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 17 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Dennis J Hansen Date of Receipt Mailing Address 1791 Connor Station Road 30 2011 City Zip Code State Transaction ID: PR1094194123163 KY Simpsonville 40067 Amount of Each Receipt this Period FEC ID number of contributing C 70.00 federal political committee. Name of Employer Occupation VP Reimb-NCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$35.00 Bi-Weekly) 805.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mary Suzanne Riedman Date of Receipt Mailing Address 4308 Hampton Creek Drive 30 11 2011 City State Zip Code Transaction ID: PR1094194223163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Gen Coun & CDO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan P Riedl Date of Receipt Mailing Address 8914 Lippincott Road 30 2011 City State Zip Code Transaction ID: PR1094194423163 KY Louisville 40222 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Sr Dir NCD Reimbursement Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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Detailed Summary Page	X 11a 11b	11c	12						
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	rederar politicar committee.		
	Name of Employer	Occupation	
	Kindred Healthcare Inc.	Mgr Reimb	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
— В.	Full Name (Last, First, Middle Initial) Michael J Bean		Date of Receipt
	Mailing Address 941 Mallard Creek Road		11 30 2011
	City	State Zip Code	Transaction ID : PR1094195123163
	Louisville	KY 40207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer	Occupation	
	Kindred Healthcare Inc.	VP Tax Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)
<u>С</u> .	Full Name (Last, First, Middle Initial) Peggy Black		Date of Receipt
	Mailing Address 1607 Helmridge Court City	State Zip Code	11 30 2011 Transaction ID : PR1094195323163
	Louisville	KY 40222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	
	Kindred Healthcare Inc.	Exec Asst to Chair & BOD	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Γ.			140.00

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

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Anne S Woods Date of Receipt Mailing Address 7420 Falls Ridge Ct. 30 2011 City State Zip Code Transaction ID: PR1094195423163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing C 78.00 federal political committee. Name of Employer Occupation VP Internal Audit Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$39.00 Bi-Weekly) 843.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephanie J Warren Date of Receipt Mailing Address 2169 Balmer-Fenwick Road 30 11 2011 City State Zip Code Transaction ID: PR1094195723163 Floyds Knobs IN 47119 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr Dir Facility Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 330.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Lucchese Date of Receipt Mailing Address 14401 Broad Oak Place 30 2011 City Zip Code State Transaction ID: PR1094195923163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing 192.00 С federal political committee. Name of Employer Occupation Sr VP & Corp Controller Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.00 Bi-Weekly) 1426.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PA		udress of any political committee	e to solicit contributions from such confinitiee.									
Full Name (Last, First, Middle Initial) A. Rose M Michels			Date of Receipt									
Mailing Address 6503 Chenoweth Run R			11 30 / Y = Y = Y = Y									
City Louisville	State KY	Zip Code 40299	Transaction ID : PR1094196023163									
FEC ID number of contributing federal political committee.	C	10250	Amount of Each Receipt this Period 30.00									
Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation Sr Dir Tax 0 Aggregate		P/R Deduction (\$15.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) 3. Joseph Landenwich Mailing Address 1822 Casselberry Road			Date of Receipt									
City Louisville	State KY	Zip Code 40205	11 30 2011 Transaction ID : PR1094196323163 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		120.00									
Name of Employer Kindred Healthcare Inc.	Occupation SVPCrpLeg	alAffairs&CrpSec										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1380.00	P/R Deduction (\$60.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) Arthur L Rothgerber			Date of Receipt									
Mailing Address 8325 Regency Woods V			11 30 / 2011									
City Louisville	State KY	Zip Code 40220	Transaction ID : PR1094196423163 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		46.00									
Name of Employer	Occupation											
Kindred Healthcare Inc.	Sr VP Reim	bursement										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 529.00	P/R Deduction (\$23.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		196.00									
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FOR LINE NUMBER: PAGE 22 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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	F	ЭR	LINE	NU	MBER	:	PAGE	2	23 OF	69
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for each category of the Detailed Summary Page		X	11a		11b		11c		12	
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Scott M Juetten Date of Receipt Mailing Address 7503 Creekton Drive 30 2011 City State Zip Code Transaction ID: PR1094198123163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. VP & Controller-NCD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Bobby V Bas Date of Receipt Mailing Address 2084 Wind River Road 30 11 2011 City State Zip Code Transaction ID: PR1094198323163 CA 92019 El Cajon Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Radiology Technologist Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 315.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steven J Fuller Date of Receipt Mailing Address 6025 Bridge Garden Rd 30 2011 City Zip Code State Transaction ID: PR1094199723163 TN Knoxville 37912 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee.

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230.00

Occupation Dist Dir Clin Ops

Aggregate Year-to-Date ▼

P/R Deduction (\$10.00 Bi-Weekly)

Name of Employer

Primary

Receipt For:

Kindred Healthcare Inc.

Other (specify)

General

FOR LINE NUMBER: PAGE 24 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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Detailed Summary Page	>	11a		11b		11c		12	
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FOR LINE NUMBER: PAGE 26 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Charles D Doten Date of Receipt Mailing Address 7644 Harbour Blvd. 30 2011 City State Zip Code Transaction ID: PR1094203623163 FL Miramar 33023 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Chief Exec Off II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Malady Date of Receipt Mailing Address 954 Lindfield Dr. 30 11 2011 City State Zip Code Transaction ID: PR1094204123163 South Park PA 15129 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Plant Ops Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy L Simpson Date of Receipt Mailing Address 140 Pioneer Trail 30 2011 City State Zip Code Transaction ID: PR1094204323163 FL Green Cove Springs 32043 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation **Executive Director II** Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

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NAME OF COMMITTEE (In Full)

Windrad Hoolthoore, Inc. PAC

Kindred Healthcar	·	
Full Name (Last, First, Mid A. James D Thigpen	dle Initial)	Date of Receipt
Mailing Address 355 Wools	sey Brooks Rd.	11 30 2011
City Fayetteville	State Zip Code GA 30215	Transaction ID : PR1094204623163 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	uting C	30.00
Name of Employer Kindred Healthcare Inc.	Occupation Plant Ops Engineer	
Receipt For: Primary Gen Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name (Last, First, Mid 3. Sharon A Barnard	dle Initial)	Date of Receipt
Mailing Address 1937 S.R.		1,1 30 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR1094204823163
Green Cove Springs	FL 32043	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C	20.00
Name of Employer Kindred Healthcare Inc.	Occupation Reg SrDir Clinical Ops-HD	
Receipt For: Primary Gen Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Mid	dle Initial)	Date of Receipt
Mailing Address 43171 But	ttermere Terrace	11 30 / Y Y Y Y Y
City Ashburn	State Zip Code VA 20147	Transaction ID : PR1094205123163 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ıting C	30.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Dir Bus Implement-HD	
Receipt For: Primary Ger	Aggregate Year-to-Date ▼	P/R Deduction (\$15.00 Bi-Weekly)
Other (specify) ▼	345.00	

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NAME OF COMMITTEE (In Full)

Kindred Healthcare, Inc. PAC

Full Name (Last, First, Middle Initial)

/		
Full Name (Last, First, Middle Initial) James J Novak		Date of Receipt
Mailing Address 9680 Ridgewalk Court		11 30 2011
City Davie	State Zip Code FL 33328	Transaction ID : PR1094205323163
	1 L 33320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Exec VP-East Reg-HD	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	966.00	P/R Deduction (\$42.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Sally I Hoffmann		Date of Receipt
Mailing Address 12905 Trade Port Place		11 30 2011
City	State Zip Code	Transaction ID : PR1094205723163
Riverview	FL 33579	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Resource CEO HD	
Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$15.00 Bi-Weekly)
Other (specify) ▼	345.00	
Full Name (Last, First, Middle Initial) Christopher A Clements		Date of Receipt
Mailing Address 3111 North Ocean Drive #1007		11 30 2011
City	State Zip Code FL 33019	Transaction ID : PR1094206223163
Hollywood	FL 33019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	1
Kindred Healthcare Inc.	Chief Exec Off III	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	P/R Deduction (\$10.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		134.00
TOTAL This Period (last page this line numb	er only)	

	FO	R LINE	NU	MBER	:	PAGE	2	29 OF	69
Use separate schedule(s) for each category of the	(ch	eck only	or or	ne)					
Detailed Summary Page	>	1 1a		11b		11c		12	
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Elizabeth D Dubois Date of Receipt Mailing Address 21 Harriman Road 30 2011 City Zip Code State Transaction ID: PR1094209423163 MA Hudson 01749 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Reg Trainer Field Acct Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Donna Kelsey Date of Receipt Mailing Address 2075 E. Tivoli Hills Drive 30 11 2011 City State Zip Code Transaction ID: PR1094210123163 UT Draper 84020 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr VP-West Reg-NCD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 575.00 Other (specify) Full Name (Last, First, Middle Initial) c. Anita Tillery Date of Receipt Mailing Address 3512 Raytee Drive 30 2011 City State Zip Code Transaction ID: PR1094211023163 Chesapeake VA 23323 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Market Executive Dir Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 30 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Christina Schramm Date of Receipt Mailing Address 166 Columbia Ave 30 2011 City Zip Code State Transaction ID: PR1094211923163 OH Chillicothe 45601 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Executive Dir II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tom Cunningham Date of Receipt Mailing Address 6705 Merwin Ave 30 11 2011 City State Zip Code Transaction ID: PR1094212123163 OH Cincinnati 45227 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Lebanon Country Manor Executive Dir II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Donna M Nackers Date of Receipt Mailing Address 1760 Waters Ferry Drive 30 2011 City State Zip Code Transaction ID: PR1094212523163 GA Lawrenceville 30043 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Reg Mgr Operation Reimb Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Joseph F Weglarz Date of Receipt Mailing Address 35 Farrington Ave 30 2011 City Zip Code State Transaction ID: PR1094212623163 MA Gloucester 01930 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Reg Financial Ana Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Celeste M Bentley Date of Receipt Mailing Address 3204 Eagle Avenue 30 11 2011 City State Zip Code Transaction ID: PR1094213323163 Key West FL 33040 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Reimb-NCD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Debra Forman Date of Receipt Mailing Address 12516 Wexton Lane 30 2011 City Zip Code State Transaction ID: PR1094213423163 TN Knoxville 37934 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Reg Mgr Field Accting Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional).....

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

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Use separate schedule(s)	(check only one)										
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	and Statements may not be sold or used by any pers g the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PA	С	
Full Name (Last, First, Middle Initial) A. Lane M Bowen		Date of Receipt
Mailing Address 10966 Secret View Drive	,	11 30 2011
City	State Zip Code	Transaction ID : PR1094213623163
Sandy	UT 84092	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Kindred Healthcare Inc.	Exec VP & President-NCD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Alichael W Beal	•	Date of Receipt
Mailing Address 10 Glenwood Road		M M / D D / Y Y Y Y
City	State Zip Code	11 30 2011
Windham	NH 03087	Transaction ID : PR1094214123163 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lach Necelpt this Fellou
federal political committee.	C	40.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Sr VP-East Reg-NCD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. John Getts	'	Date of Receipt
Mailing Address 150 Evergreen Circle		11 30 2011
City	State Zip Code	Transaction ID : PR1094214623163
Henniker	NH 03242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	-
Kindred Healthcare Inc.	Chief Exec Officer-TCC	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	240.00	P/R Deduction (\$5.00 Weekly)
SUBTOTAL of Receipts This Page (options	al)	165.00
TOTAL This Period (last page this line nur	nber only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 33 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	ı 🗆	111	b	11c	12					
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Any information copied from such Reports and S or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC													
Full Name (Last, First, Middle Initial) 1. James Holcomb	Date of Receipt												
Mailing Address 317 30Th Avenue N.E.	M - 1.		L	30	/ Y	2011							
City	State MT	Zip Code		Transaction ID : PR1094215123163 Amount of Each Receipt this Period									
Great Falls	IVI I	59404	Amoi	unt of	f Ead	ch Red	ceipt th	is Period					
FEC ID number of contributing federal political committee.	С				7		7	20	0.00				
Name of Employer	Occupation												
Kindred Healthcare Inc.	Executive D	Dir III											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		240.00	P/R D	educt	tion ((\$10.00) Week	ly)					
Full Name (Last, First, Middle Initial) 3. Susan A Kesterson			Date	of R	ecei	pt							
Mailing Address 2334 Heritage Dr				11 30 2011									
City	State	Zip Code	Tra	nsact	tion	ID : PI	R10942	1622316	3				
Corona	CA	92882	Amoi	unt of	f Ead	ch Red	ceipt th	is Period					
FEC ID number of contributing federal political committee.	С			30.00									
Name of Employer Kindred Healthcare Inc.	Occupation Reg Financ												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.00	P/R Do	educt	tion (\$15.00) Bi-We	ekly)					
Full Name (Last, First, Middle Initial) C. Maxine A Niel			Date	of R	ecei	pt							
Mailing Address 1699 Hastings Drive			1.	м 1	/	30	/ Y	2011	Y				
City	State CA	Zip Code						21662316					
Manteca	CA	95336	Amoi	unt of	f Ead	ch Red	ceipt th	is Period					
FEC ID number of contributing federal political committee.	С				7		7	20	0.00				
Name of Employer	Occupation												
Valley Gardens Health Care	Executive D	Dir II											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		210.00	P/R D	educt	tion ((\$10.00) Week	ly)					
SUBTOTAL of Receipts This Page (optional)				-	1		-1	70	.00				
TOTAL This Period (last page this line number	only)				,		-						

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and Sta or for commercial purposes, other than using the r											
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC											
Full Name (Last, First, Middle Initial) A. Sylvia Burton Mailing Address 433 S. Plantation	Date of Receipt										
City	11 30 2011 Transaction ID : PR1094217623163										
Cookeville	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		30.00								
' '	Occupation Asst Execut		-								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) 3. Mark S Pfeifer			Date of Receipt								
Mailing Address 11014 Brave Ct.	11 30 / 2011										
City Indianapolis	City State Zip Code Indianapolis IN 46236										
FEC ID number of contributing federal political committee.	С		40.00								
Kindred Healthcare Inc.	Occupation Reg Financi										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) Donna Susan Dickerson			Date of Receipt								
Mailing Address 5283 Pryor Road			11 30 2011								
City Maryville	State TN	Zip Code 37804	Transaction ID : PR1094220723163 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		20.00								
Name of Employer	Occupation										
Kindred Healthcare Inc. Receipt For:	Executive D	Dir I									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			90.00								
TOTAL This Period (last page this line number or	nly)	·····									

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not be sold or used by any person for the purpose of soliciting contributions											

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) A. Keith A Mandrell		Date of Receipt
Mailing Address 8813 Mallow Drive		11 30 2011
City	State Zip Code	Transaction ID : PR1094221223163
Knoxville	TN 37922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	1
Kindred Healthcare Inc.	Executive Dir III	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name // cat First than 1997		
Full Name (Last, First, Middle Initial) 3. Anna Ruth Birdwell		Date of Receipt
Mailing Address 5450 Grundy Quarles Hwy		11 30 2011
City	State Zip Code	11 30 2011 Transaction ID : PR1094221323163
Bloomington Spring	TN 38545	Transaction ID: PR1094221323163 Amount of Each Receipt this Period
FEC ID number of contributing	330.0	sa.n. c. Edon recorpt tills i ellou
federal political committee.	C	20.00
Name of Employer	Occupation]
Kindred Healthcare Inc.	Dir Nursing III]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address P O Box 223		11 30 2011
City	State Zip Code	Transaction ID : PR1094222023163
Carthage	TN 37030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	1
Kindred Healthcare Inc.	Executive Dir II	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	P/R Deduction (\$10.00 Bi-Weekly)
Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional).		60.00
TOTAL This Period (last page this line number	er only)	

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not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribu 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Gloria J Miller Date of Receipt Mailing Address 2700 Saint Marys Road 30 2011 City State Zip Code Transaction ID: PR1094222123163 NC Hillsborough 27278 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dist Dir Operations I Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. James N. Rogers Date of Receipt Mailing Address 147 Deepspring Drive 30 11 2011 City State Zip Code Transaction ID: PR1094224323163 Bardstown KY 40004 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr Dir Clin Systems Dev Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ronald D Long Date of Receipt Mailing Address 148 Cheyenne Road 30 2011 City State Zip Code Transaction ID: PR1094224523163 KY Shelbyville 40065 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Dir Contract Admin Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 37 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Stephen F. Stoess Date of Receipt Mailing Address 514 Locust Creek Blvd. 30 2011 City Zip Code State Transaction ID: PR1094224623163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing C 46.80 federal political committee. Name of Employer Occupation Sr Dir Telecommunications Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$23.40 Bi-Weekly) 538.20 Other (specify) Full Name (Last, First, Middle Initial) B. James E. Bell Date of Receipt Mailing Address 14213 Aiken Road 30 11 2011 City State Zip Code Transaction ID: PR1094225023163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr Dir Div Reimb-HD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul R. Eiseman Date of Receipt Mailing Address 3714 Fringe Tree Place 30 2011 City Zip Code State Transaction ID: PR1094225823163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Bus Dev & Phys Rel-HD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) 106.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	MBER	:	PAGE	3	38 OF	69
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Detailed Summary Page	×	11a		11b		11c		12	
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Catharine C Young Date of Receipt Mailing Address 6303 Deep Creek Drive 30 2011 City State Zip Code Transaction ID: PR1094228023163 KY 40059 Prospect Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation VP & Employment Counsel Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mary W Miller Date of Receipt Mailing Address 3201 Vista Verde Lane SW 30 11 2011 City State Zip Code Transaction ID: PR1094228423163 WA Tumwater 98512 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Clinical Impl Cnslt Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sharon Theresa McGuyer Date of Receipt Mailing Address 22441 15Th Ave. So. 30 2011 City Zip Code State Transaction ID: PR1094229023163 WA Des Moines 98198 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Dir Nursing II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Weekly) 240.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional).....

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

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Charles K. Currens Mailing Address 7801 McCarthy Lane City Louisville FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For:	State Zip Code KY 40222 C Occupation Dir IS Prod Svcs Aggregate Year-to-Date ▼	Date of Receipt 11 30 2011 Transaction ID: PR1094229123163 Amount of Each Receipt this Period 40.00
Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Keith Krein Mailing Address 3227 North 88th Street		Date of Receipt 11 30 2011
City Mesa	State Zip Code AZ 85207	Transaction ID: PR1094229823163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Sr VP & Chief Med Off-NCD Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Patricia M McGillan		Date of Receipt
Mailing Address 510 Altagate Rd		11 30 2011
City Louisville	State Zip Code KY 40206	Transaction ID : PR1094229923163
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer	Occupation	
Kindred Healthcare Inc. Receipt For: Primary Other (specify) ▼	VP Pat Saf & Reg Compl-HD Aggregate Year-to-Date ▼ 690.00	P/R Deduction (\$30.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		140.00
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page		X	11a		11b		11c		12		
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NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Barbara L Baylis Mailing Address 7212 Deer Ridge Road City State Zip Code Prospect KY 40059 FEC ID number of contributing federal political committee. Name of Employer Occupation	Date of Receipt 11 30 2011 Transaction ID: PR1094230023163 Amount of Each Receipt this Period
Barbara L Baylis Mailing Address 7212 Deer Ridge Road City State Zip Code Prospect KY 40059 FEC ID number of contributing federal political committee.	11 30 2011 Transaction ID : PR1094230023163 Amount of Each Receipt this Period
City State Zip Code Prospect KY 40059 FEC ID number of contributing federal political committee.	Transaction ID : PR1094230023163 Amount of Each Receipt this Period
Prospect KY 40059 FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	
federal political committee.	40.00
Name of Employer Occupation	40.00
	+
Kindred Healthcare Inc. Sr VP Clin & Res Svcs-NCD	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Pete Kalmey	Date of Receipt
Mailing Address 3502 Hedgewick Place	11 30 _2011 _
City State Zip Code	Transaction ID : PR1094232023163
Louisville KY 40245	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	30.00
Name of Employer Occupation	
Kindred Healthcare Inc. VP Ops Central Region	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 240.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Mary J Yesue	Date of Receipt
Mailing Address P. O. Box 921	11 30 2011
City State Zip Code	Transaction ID : PR1094232123163
York Harbor ME 03911	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	30.00
Name of Employer Occupation	
Kindred Healthcare Inc. Dist Dir Clin Ops	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)
UBTOTAL of Receipts This Page (optional)	100.00
OTAL This Period (last page this line number only).	

FOR LINE NUMBER: PAGE 41 OF 69 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC			
Full Name (Last, First, Middle Initial) Janet L Worcester Mailing Address 24 Saratoga Avenue City Bangor FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General	State ME C Occupation Dist Dir Clir Aggregate		Date of Receipt 11 30 2011 Transaction ID: PR1094232223163 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
Other (specify) ▼ Full Name (Last, First, Middle Initial)	L	230.00	
Mailing Address 75 Mustang Run Road City Lander	State WY	Zip Code 82520	Date of Receipt 11 30 2011 Transaction ID: PR1094233323163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Executive D Aggregate		P/R Deduction (\$10.00 Weekly)
Full Name (Last, First, Middle Initial) Edward J Goddard Mailing Address 32 Peters Lane			Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Wrentham	State MA	Zip Code	Transaction ID : PR1094233523163
FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General	Occupation VP Labor F	Relations Year-to-Date ▼	Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			120.00
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Jeffrey F Luckett Date of Receipt Mailing Address 7701 Kendrick Crossing Lane 30 2011 City State Zip Code Transaction ID: PR1094234423163 KY Louisville 40291 Amount of Each Receipt this Period FEC ID number of contributing C 44.00 federal political committee. Name of Employer Occupation Dir Internal Audit-IS Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$22.00 Bi-Weekly) 506.00 Other (specify) Full Name (Last, First, Middle Initial) B. Janet Biedron Date of Receipt Mailing Address 1736 Dunkeld Lane 30 11 2011 City State Zip Code Transaction ID: PR1094234623163 CA Folsom 95630 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Chief Exec Off II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Peter D Corless Date of Receipt Mailing Address 3308 Overlook Ridge Rd 30 2011 City State Zip Code Transaction ID: PR1094235223163 KY Prospect 40059 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation Sr VP HR & Admin-NCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼

124.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

690.00

P/R Deduction (\$30.00 Bi-Weekly)

Primary

Other (specify)

General

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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Tamila Johnson-White Date of Receipt Mailing Address 2615 Zhale Smith Rd. 30 2011 City State Zip Code Transaction ID: PR1094235423163 KY LaGrange 40031 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Dir Case Mgmt-NCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lester Bohnert Date of Receipt Mailing Address 2259 N. Pennsylvania Street 11 30 2011 City State Zip Code Transaction ID: PR1094235723163 IN Indianapolis 46205 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dist Dir Operations I Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Douglas Roth Date of Receipt Mailing Address 9891 Heytesbery 30 2011 City State Zip Code Transaction ID: PR1094237323163 UT Sandy 84092 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation VP Finance-West RegNCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Bi-Weekly) 880.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 44 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Douglas T Collins Date of Receipt Mailing Address 3703 River Bluff Road 30 2011 City State Zip Code Transaction ID: PR1094241223163 KY Prospect 40059 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Dir Fin Sys-NCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda L Newberry-Ferguson Date of Receipt Mailing Address 11310 Haleco Lane 30 11 2011 City State Zip Code Transaction ID: PR1094241923163 Hales Corners WI 53130 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Chief Exec Off II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Amanda G Estes Date of Receipt Mailing Address 4211 Wine Cellar Court 30 2011 City Zip Code State Transaction ID: PR1094242323163 KY Louisville 40272 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Mgr Internal Audit Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Susan Cote Mailing Address 24 Adams Court		Date of Receipt
City	State Zip Code	11 30 2011 Transaction ID : PR1094242423163
Brewer	ME 04412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Kindred Healthcare Inc. Receipt For:	Reg Dir Field Accting-NCD	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Wendy S Swisher		Date of Receipt
Mailing Address 5012 Four Leaf Ct		11 30 2011
City	State Zip Code	Transaction ID : PR1094242723163
Greenville	IN 47124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer Kindred Healthcare Inc.	Occupation	
Receipt For:	VP HR & Leadership Dev	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. Elvin D. Alsaybar		Date of Receipt
Mailing Address 742 White Rock Trail		11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code GA 30024	Transaction ID : PR1094242923163
Suwanee	GA 30024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Kindred Healthcare Inc. Receipt For:	Reg Dir Field Accting-NCD	
Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		60.00
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FOR LINE NUMBER: PAGE 46 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Philip L. Jones Date of Receipt Mailing Address 702 Helmsdale Place N. 30 2011 City Zip Code State Transaction ID: PR1094243523163 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Chief Fin Off I Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Raymond J Sierpina Date of Receipt Mailing Address 14 Westwind Road 30 11 2011 City State Zip Code Transaction ID: PR1094246623163 KY Louisville 40207 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. VP Public Pol &GovtAffair Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Bi-Weekly) 2300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Steven Tanner Date of Receipt Mailing Address 1059 Mt Vernon Dr 30 2011 City State Zip Code Transaction ID: PR1094246823163 IN Greenwood 46142 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Inc. **Executive Dir III** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) 280.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Thomas Wood Mailing Address 2949 Glascock Street City Oakland FEC ID number of contributing federal political committee. Name of Employer	State Zip Code CA 94601 C Occupation	Date of Receipt 11 30 2011 Transaction ID: PR1094247223163 Amount of Each Receipt this Period 130.00
Kindred Healthcare Inc. Receipt For: Primary General Other (specify) ▼	Sr Dist Dir Operations Aggregate Year-to-Date ▼ 1495.00	P/R Deduction (\$65.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Gwynn Rucker Mailing Address 15106 59th Place NE City Kenmore FEC ID number of contributing	State Zip Code WA 98028	Date of Receipt 11 30 2011 Transaction ID: PR1094247823163 Amount of Each Receipt this Period
federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation Market Executive Dir Aggregate Year-to-Date 720.00	90.00 P/R Deduction (\$30.00 Weekly)
Full Name (Last, First, Middle Initial) Sharon J Spittle Mailing Address 26 Estes Street City Ipswich FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	State Zip Code MA 01938 C Occupation Executive Dir II Aggregate Year-to-Date ▼	Date of Receipt 11 30 2011 Transaction ID : PR1094250023163 Amount of Each Receipt this Period 50.00 P/R Deduction (\$10.00 Weekly)
SUBTOTAL of Receipts This Page (optional)		270.00
TOTAL This Period (last page this line number	<u> </u>	

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NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) Mary Kathleen Owens Mailing Address 12667 S. Bear Meadow Ct. City Draper FEC ID number of contributing federal political committee.	State Zip Code UT 84020	Date of Receipt 11 30 2011 Transaction ID: PR1094250423163 Amount of Each Receipt this Period 20.00
Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	Occupation VP Clin Ops-Wst Reg-NCD Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Benjamin A Breier Mailing Address 5400 Farm Ridge Lane City Prospect FEC ID number of contributing	State Zip Code KY 40059	Date of Receipt 11 30 2011 Transaction ID: PR1094250923163 Amount of Each Receipt this Period 384.60
Receipt For: Primary Other (specify) ▼ Name of Employer Kindred Healthcare Inc. General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 4422.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name (Last, First, Middle Initial) Krista J Ward Mailing Address 4541 Southern Parkway City Louisville FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	State Zip Code KY 40214 C Occupation Dir Fin Sys Dev Aggregate Year-to-Date ▼	Date of Receipt 11 30 2011 Transaction ID: PR1094251023163 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		424.60
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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Kathleen C Paradowski Date of Receipt Mailing Address P.O. Box 1332 30 2011 City Zip Code State Transaction ID: PR1135243823163 KY Crestwood 40014 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation Clin Informaticist Cnslt Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Steve Ross Date of Receipt Mailing Address 35069 Roberts Lane 30 11 2011 City State Zip Code Transaction ID: PR1135252623163 OR 97051 St Helens Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Executive Dir I Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Weekly) 480.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Josephine Litzenberger Date of Receipt Mailing Address 11401 Dr. M.L.K. Jr. Street N. 30 2011 Apt 1201 City State Zip Code Transaction ID: PR1135286923163 FL St Petersburg 33716 Amount of Each Receipt this Period FEC ID number of contributing 36.00 С federal political committee. Name of Employer Occupation Sr Dir Managed Care Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$18.00 Bi-Weekly) 414.00 Other (specify) 86.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC	;	
Full Name (Last, First, Middle Initial) Gregory T Hayden Mailing Address 7207 Trail Ridge Court		Date of Receipt
		11 30 2011
City	State Zip Code	Transaction ID : PR1150400123163
Louisville	KY 40241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Dir State Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Julie A Viers		Date of Receipt
Mailing Address 9508 Corinthian Dr		11 30 _2011 _
City	State Zip Code	Transaction ID : PR1150400523163
Louisville	KY 40299	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Sr Dir Fin Reporting	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Rachael L Parker	_	Date of Receipt
Mailing Address 70 Birch Ridge Rd		11 30 2011
City	State Zip Code	Transaction ID : PR1150411123163
Westford	VT 05494	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	+
Kindred Healthcare Inc.	Executive Dir II	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	470.00	P/R Deduction (\$10.00 Weekly)
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ITEMIZED RECEIPTS 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Pamela M Bresee Date of Receipt Mailing Address 4155 SW 192nd Avenue 30 2011 City Zip Code State Transaction ID: PR1227852423163 OR 97007 Aloha Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Reg Financial Ana Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. Larry Livengood Date of Receipt Mailing Address 1219 Pilot Lane 30 11 2011 City State Zip Code Transaction ID: PR1267996723163 TX Galveston 77554 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. District Director HR Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Beth Cullum Date of Receipt Mailing Address 22 Frederick St. 30 2011 City State Zip Code Transaction ID: PR1267997023163 MA Newton 02460 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Chief Exec Off II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$5.00 Weekly) 205.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional).....

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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Loretta R Jordan Date of Receipt Mailing Address 4017 Ballard Woods Drive 30 2011 City State Zip Code Transaction ID: PR1267997723163 KY Smithfield 40068 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Mgr Fin Sys Dev Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Russell D Ragland Date of Receipt Mailing Address 9902 Palace Green Way 30 11 2011 City State Zip Code Transaction ID: PR1267998123163 VA Vienna 22181 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr VP Fin-NCD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 1150.00 Other (specify) Full Name (Last, First, Middle Initial) c. Catherine Nurmela Date of Receipt Mailing Address 1409 W. Elmdale 30 2011 Zip Code City State Transaction ID: PR1267998423163 IL Chicago 60660 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee.

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Aggregate Year-to-Date ▼

P/R Deduction (\$15.00 Bi-Weekly)

Name of Employer

Primary

Receipt For:

Kindred Healthcare Inc.

Other (specify)

General

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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Donna Sroczynski Date of Receipt Mailing Address 399 Fountain Drive 30 2011 City State Zip Code Transaction ID: PR1281185323163 Elgin IL 60124 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation VP Clin Ops-CentralRegNCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diane L. Otteman Date of Receipt Mailing Address 40 East Cedar Apt. #21A 30 11 2011 City State Zip Code Transaction ID: PR1300206423163 IL Chicago 60611 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Chief Exec Off II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jane Mathews Date of Receipt Mailing Address 464 E. Cynthia Way 30 2011 City State Zip Code Transaction ID: PR1300207323163 UT North Salt Lake 84054 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Reg Dir HR-NCD Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Rita D Simmons Date of Receipt Mailing Address 200 Franck Avenue 30 2011 City State Zip Code Transaction ID: PR1333437023163 KY Louisville 40206 Amount of Each Receipt this Period FEC ID number of contributing C 32.00 federal political committee. Name of Employer Occupation Sr Dir Ops Risk Mgmt Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$16.00 Bi-Weekly) 368.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bobby G. Muse Jr. Date of Receipt Mailing Address 4514 Oak Pointe Drive 30 11 2011 City State Zip Code Transaction ID: PR1333437123163 KY Louisville 40245 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Rec Mgmt & Bus Contin Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark D. Johnson Date of Receipt Mailing Address 3011 Springcrest Drive 30 2011 City Zip Code State Transaction ID: PR1336786723163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Mgr Desktop Supp Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly)

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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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Patrick Herm Date of Receipt Mailing Address 11004 Fox Moore Court 30 2011 City State Zip Code Transaction ID: PR1336787123163 KY Louisville 40223 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc Reg Financial Ana Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa J Schmidt Date of Receipt Mailing Address 7840 Broad Run Road 30 11 2011 City State Zip Code Transaction ID: PR1346288223163 KY Louisville 40291 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Mgr Fin Sys Dev Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Julieta C Morton Date of Receipt Mailing Address 5105 Deerchase Tr 30 2011 City State Zip Code Transaction ID: PR1355829323163 NC Wake Forest 27587 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Rehab Mgr-PT Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	F	OR	LINE	NU	MBER	:	PAGE	 6	OF	69
Use separate schedule(s)	(c	he	ck only	or	ne)					
for each category of the Detailed Summary Page		X	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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) James C Hansen Date of Receipt Mailing Address 1944 South 275 East 30 2011 City State Zip Code Transaction ID: PR1394177123163 UT Clearfield 84015 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Reg Mgr Operation Reimb Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mary D Van De Kamp Date of Receipt Mailing Address 251 Arbor Lane 30 11 2011 City State Zip Code Transaction ID: PR1408953123163 WI Green Bay 54301 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Sr VP Clinical Ops-RHB Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Pamela A. Justice Date of Receipt Mailing Address 5912 Mercury Dr 30 2011 City State Zip Code Transaction ID: PR1408953223163 KY Louisville 40291 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Dir Fin Sys Dev Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 57 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Katherine W Gilchrist Date of Receipt Mailing Address 1668 Victory Court 30 2011 City State Zip Code Transaction ID: PR1524244423163 KY Prospect 40059 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Sr VP Finance-RHB Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 670.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juanita D Blevens Date of Receipt Mailing Address 1712 Penile Road 30 11 2011 City State Zip Code Transaction ID: PR1541444223163 KY Louisville 40272 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Dir Casualty Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cassandra Rocke Date of Receipt Mailing Address 15230 Kingston Ct. 30 2011 Foxridge Estates City State Zip Code Transaction ID: PR1582894123163 CO **Brighton** 80602 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Dist Dir Operations I Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

FOR LINE NUMBER: PAGE 58 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC										
Full Name (Last, First, Middle Initial) Christopher Murphy Mailing Address 17108 Deercrossing Trail			Date of Receipt							
City	·									
Fisherville	KY	40023	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer	Occupation									
Kindred Healthcare Inc.	Sr VP-Cent	ral Reg-NCD								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) Marilyn Weaver Mailing Address 1700 Penile Rd		,	Date of Receipt							
	11 30 2011									
City Valley Station	State KY	Transaction ID : PR1618127223163 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		20.00							
Name of Employer Kindred Healthcare	Occupation Mgr Leased									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. Mary Jane Dailey			Date of Receipt							
Mailing Address 10411 Loving Trail Drive			11 30 2011							
City Frisco	State TX	Zip Code 75035	Transaction ID : PR1618127523163 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		200.00							
Name of Employer	Occupation									
Kindred Healthcare, Inc.	VP & CCO	SoWest Reg-HD								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2300.00	P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			260.00							
TOTAL This Period (last page this line number	only)	·····								

FOR LINE NUMBER: PAGE 59 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Kathy Adkins Date of Receipt Mailing Address 6522 State Rd. 250 30 2011 City State Zip Code Transaction ID: PR1618128623163 KY Calhoun 42327 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Rehab Mgr-OT Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeanna R. Conder Date of Receipt Mailing Address 707 Quisenberry Lane 30 11 2011 City State Zip Code Transaction ID: PR1618128923163 Winchester KY 40391 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare **Dir Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Williams Date of Receipt Mailing Address 520 East 9000 South 30 2011 City State Zip Code Transaction ID: PR1618129023163 UT Sandy 84070 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Kindred Healthcare Executive Dir II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

Llee concrete cohodule(e)	1 '	FOR LINE NUMBER: PAGE 60 OF 69										
Use separate schedule(s) for each category of the	(check only one)								1			
Detailed Summary Page		X	11a		11b		11c		12			
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

Any information copied from such Reports and S or for commercial purposes, other than using the $$	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) A. Darrin Hull		Date of Receipt
Mailing Address 277 Bark River Court		11 30 2011
City	State Zip Code	Transaction ID : PR1622380123163
Delafield	WI 53018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Executive Dir III	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. Susan D. Rose	_	Date of Receipt
Mailing Address 3402 Acacia Avenue		11 30 / Y 2 7 2 7 3
City	State Zip Code	Transaction ID : PR1622380223163
Shepherdsville	KY 40165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Dir Internal Audit	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. Robert Groezinger		Date of Receipt
Mailing Address 25537 Jane Street		Date of Receipt 11 30 2011
City	State Zip Code	Transaction ID : PR1668092323163
San Bernardino	CA 92404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Kindred Healthcare Inc.	Area Mgr Maint	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	P/R Deduction (\$15.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	>	100.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 61 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Richard C Gandersman Date of Receipt Mailing Address 6685 Miami Woods Drive 30 2011 City Zip Code State Transaction ID: PR1724379223163 OH Loveland 45140 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation SVP Hospice&Home Health Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Derrick Glum Date of Receipt Mailing Address 1125 Sherman Cir. 11 30 2011 City State Zip Code Transaction ID: PR1767984923163 UT St. George 84790 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Executive Dir II Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michelle Mullen Date of Receipt Mailing Address 6411 Mallard Creek Run 30 2011 City Zip Code State Transaction ID: PR1774751223163 OH Lorain 44053 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Chief Clinical Off II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 62 OF 69 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Full Name (Last, First, Middle Initial) David M Mikula Mailing Address 680 South 4th Avenue City Louisville FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For:	State Zip Code KY 40207 C Occupation SVP Sales & Marketing HD Aggregate Year-to-Date ▼	Date of Receipt 11 30 2011 Transaction ID: PR1774751723163 Amount of Each Receipt this Period 40.00
Primary General Other (specify) ▼	280.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Philip B Ragsdell Mailing Address 12004 Log Cabin Lane City	State Zip Code	Date of Receipt 11 30 2011 Transaction ID : PR1784229523163
Louisville FEC ID number of contributing federal political committee.	KY 40223	Amount of Each Receipt this Period 44.00
Name of Employer Kindred Healthcare Receipt For: Primary General Other (specify) ▼	Occupation Dir Customer Supp Aggregate Year-to-Date ▼ 506.00	P/R Deduction (\$22.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Andrea R. Romisher Mailing Address 1846 Douglass Blvd		Date of Receipt 11 30 2011
City Louisville FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Primary General Other (specify)	State Zip Code KY 40205 C Occupation VP Benefits & Comp Aggregate Year-to-Date ▼ 230.00	Transaction ID : PR1784229923163 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	•	104.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 63 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Timmy L. Hesson Date of Receipt Mailing Address 2710 Pikes Peak Boulevard 30 2011 City Zip Code State Transaction ID: PR1784230723163 KY Louisville 40214 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Dir Wintel & Storage Mgmt Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 345.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lawrence J. Toye Date of Receipt Mailing Address 3 September Lane 30 11 2011 City State Zip Code Transaction ID: PR1784230823163 MA Burlington 01803 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Kindred Healthcare Controller Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carol Falo Date of Receipt Mailing Address 7041 Clubview Dr 30 2011 City State Zip Code Transaction ID: PR1784231523163 PΑ Bridgeville 15017 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Chief Clinical Off II Kindred Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 480.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 64 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Elnora DeLeon-Flores Date of Receipt Mailing Address 3711 Bechelli Lane 30 2011 City State Zip Code Transaction ID: PR1784231923163 CA Redding 96002 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Executive Dir II Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Michael J Warrington Date of Receipt Mailing Address 118 Frosted Pond PL. 30 11 2011 City State Zip Code Transaction ID: PR1797971023163 The Woodlands TX 77381 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Kindred Healthcare Inc. Division VP-HD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kim K Baker Date of Receipt Mailing Address 164 River Road 30 2011 City State Zip Code Transaction ID: PR1826753823163 MA Hanover 02339 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Dist Dir Operations I Kindred Healthcare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-Weekly) 230.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 65 OF 69 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan		
NAME OF COMMITTEE (In Full) Kindred Healthcare, Inc. PAC		
Pleasant Hill FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc. Receipt For: Ag	State Zip Code CA 94523 Cocupation ecutive Dir III ggregate Year-to-Date ▼	Date of Receipt 11 30 2011 Transaction ID: PR1829395423163 Amount of Each Receipt this Period 20.00
Primary General Other (specify) ▼	230.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Robert Gundersen Mailing Address 9 Barnside Lane City	State Zip Code	Date of Receipt 11 30 2011
•	MA 02563	Transaction ID : PR1829395723163 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		20.00
Kindred Healthcare Inc. Ma	ccupation urket Chief Exec Off III ggregate Year-to-Date ▼ 240.00	P/R Deduction (\$5.00 Weekly)
Full Name (Last, First, Middle Initial) Barry Somervell		Date of Receipt
Mailing Address 339 Gillette Drive		11 30 / Y Y Y Y Y Y Y
•	State Zip Code TN 37069	Transaction ID : PR1835833723163
FFO ID average of contribution		Amount of Each Receipt this Period
Kindred Healthcare Inc. SV	ccupation /P Sales & Bus Dev NCD ggregate Year-to-Date ▼ 1150.00	P/R Deduction (\$50.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		140.00
TOTAL This Period (last page this line number only)		

FOR LINE NUMBER: PAGE 66 OF 69 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Kindred Healthcare, Inc. PAC Full Name (Last, First, Middle Initial) Laura Hoffpauir Date of Receipt Mailing Address 1805 Pintail Pkwy 30 2011 City State Zip Code Transaction ID: PR1887633323163 TX Euless 76039 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Executive Dir II Kindred Healthcare, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Bi-Weekly) 270.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Jeffrey M Jasnoff Date of Receipt Mailing Address 9103 Crowne Springs Circle Apt 301 11 30 2011 City State Zip Code Transaction ID: PR1961243323163 KY Louisville 40241 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Kindred Healthcare, Inc. Sr VP Human Resources-HD Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Bi-Weekly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... 8613.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	1		FOR LINE I	
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		Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State	mente may	not he sold or use		
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
> Kindred Healthcare, Inc. PAC				
/				
Full Name (Last, First, Middle Initial)				Date of Disbursement
A. Jim Renacci For Congress				M M / D D / Y Y Y Y
Mailing Address 150 Smokerise Drive				11 04 2011
City Wadsworth	State OH	Zip Code 44281		Transaction ID: 42795880
Purpose of Disbursement	011	44261		
Contribution			011	Amount of Each Disbursement this Period
Candidate Name			Category/	
Rep. James Renacci			Type	2000.00
	ment For:			
Senate President	Primary Other (spe	General		Contribution
State: OH District: 16	Other (spe	city) \blacktriangledown		
Full Name (Last, First, Middle Initial)				
B. Federation of American Hospitals	PAC			Date of Disbursement
				M M / D D / Y Y Y Y
Mailing Address 750 9th Street, NW				11 11 2011
Suite 600 City	State	Zip Code		
Washington	DC	20001		Transaction ID: 42836040
Purpose of Disbursement				
Contribution			011	Amount of Each Disbursement this Period
Candidate Name		'	Category/	5000.00
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Federation of American Hospitals			Туре	, , , , , , , , , , , , , , , , , , , ,
	ment For:	General	Type	Contribution
Office Sought: House Disburse	ment For: Primary	General cify) ▼	Type	Contribution
Office Sought: House Disburse Senate	ment For:		Type	Contribution
Office Sought: House Disburse Senate President	ment For: Primary		Туре	Contribution
Office Sought: House Senate President State: Disburse	ment For: Primary		Туре	Contribution Date of Disbursement
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress	ment For: Primary		Туре	Date of Disbursement
Office Sought: House Senate President State: Disburse Senate President State: Full Name (Last, First, Middle Initial)	ment For: Primary		Туре	Date of Disbursement
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress	ment For: Primary		Type	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington	ment For: Primary Other (spe	cify) ▼	Туре	Date of Disbursement
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City	ment For: Primary Other (spe	cify) ▼ Zip Code		Date of Disbursement 11
Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution	ment For: Primary Other (spe	cify) ▼ Zip Code	011	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name	ment For: Primary Other (spe	cify) ▼ Zip Code		Date of Disbursement 11
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler	ment For: Primary Other (spe	Zip Code 40508	011 Category/	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler Office Sought: House Senate Disburse	ment For: Primary Other (spe	Zip Code 40508	011 Category/	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler Office Sought: House Senate President Disburse	ment For: Primary Other (spe	Zip Code 40508	011 Category/	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler Office Sought: House Senate Disburse	ment For: Primary Other (spe	Zip Code 40508	011 Category/	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler Office Sought: House Senate President State: KY District: 06	ment For: Primary Other (spe	Zip Code 40508	011 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) C. Ben Chandler For Congress Mailing Address P.O. Box 12678 City Lexington Purpose of Disbursement Contribution Candidate Name Rep. Benjamin Chandler Office Sought: House Senate President Disburse	ment For: Primary Other (spe	Zip Code 40508	011 Category/ Type	Date of Disbursement M M / 11 / 2011 Transaction ID : 42836291 Amount of Each Disbursement this Period 2500.00 Contribution

SCHEDULE B (FEC Form 3X)	Lice congrate schedule(s)		FOR LINE NUMBER: PAGE 68 OF 69						
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only		□ 04	24 25		72	
		Summary Page	21b 27	22 28a	23 28b	24 28c			
Any information copied from such Reports and Stater									s
or for commercial purposes, other than using the name	ne and add	ress of any politic	al committee to	solicit co	ntributions	from suc	h comn	nittee.	
NAME OF COMMITTEE (In Full)									
Kindred Healthcare, Inc. PAC									
Full Name (Last, First, Middle Initial)	_								
A. Democratic Senatorial Campaign (Committ	ee			Disburse				
Mailing Address 120 Maryland Avenue, NE				11	1	4	2011	_ Y	
,	State	Zip Code		Trans	action ID	: 428435	86		
Washington Purpose of Disbursement	DC	20002		ITalis	action ib	. 420433	00		
Contribution			011	Amoun	t of Each	Disburse	ment thi	s Peri	od
Candidate Name			Category/					00.00	
Democratic Senatorial Campaign C		ee	Туре		-,-	7	50	00.00	-
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