FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Kindred Healthcare, Inc. Political Action Committee

ADDRESS (number and street)

680 South Fourth Avenue

Check if different than previously reported. (ACC)

CITY	STATE	ZIPCODE	
Louisville	KY	40202	2412

2. **FEC IDENTIFICATION NUMBER**

C00242271

3. IS THIS REPORT — NEW (N) X **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — General (12G) — Runoff (12R); Convention (12C) — Special (12G)

Election on ____ in the State of ____

(d) 30-Day **Post**-Election Report for the: X General (30G) — Runoff (30R) — Special (30S)

Election on 11 02 2004 in the State of KY

5. Covering Period 10 14 2004 through 11 22 2004

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

Type or Print Name of Treasurer: Hank Robinson

Signature of Treasurer: Electronically Filed by Hank Robinson — Date 11 24 2004

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Kindred Healthcare, Inc. Political Action Committee

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		155792.33
(b) Cash on Hand at Begining of Reporting Period	131309.99	
(c) Total Receipts (from Line 19)	20582.70	125943.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	151892.69	281735.57
7. Total Disbursements (from Line 31)	14250.00	144092.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	137642.69	137642.69
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Kindred Healthcare, Inc. Political Action Committee

Report Covering the Period: From: M M 10 D D 14 Y Y Y Y 2004 To: M M 11 D D 22 Y Y Y Y 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	16954.70	
(ii) Unitemized	3628.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	20582.70	125443.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	20582.70	125443.24
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	20582.70	125943.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20582.70	125943.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	46.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	46.38
22. Transfers to Affiliated/Other Party Committees	500.00	2000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	9000.00	112000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	288.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	288.50
29. Other Disbursements	4750.00	29758.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	14250.00	144092.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	14250.00	144092.88

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20582.70	125443.24
34. Total Contribution Refunds (from Line 28(d))	0.00	288.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20582.70	125154.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	46.38
37. Offsets to Operating Expenditures (from Line 15. page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	46.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
William M Altman
Mailing Address 2701 Sycamore Woods Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPComplGovtProg&IntAudit
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 920.00
Date of Receipt: 10 / 18 / 2004
Transaction ID: R59851
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
William M Altman
Mailing Address 2701 Sycamore Woods Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPComplGovtProg&IntAudit
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 920.00
Date of Receipt: 11 / 01 / 2004
Transaction ID: R60242
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
William M Altman
Mailing Address 2701 Sycamore Woods Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPComplGovtProg&IntAudit
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 920.00
Date of Receipt: 11 / 15 / 2004
Transaction ID: R60651
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Teresa S Anderson
Mailing Address 7115 Coachwood Drive
City: Georgetown | State: IN | Zip Code: 47122
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00

Date of Receipt: 10 18 2004
Transaction ID: R59773
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Teresa S Anderson
Mailing Address 7115 Coachwood Drive
City: Georgetown | State: IN | Zip Code: 47122
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00

Date of Receipt: 11 01 2004
Transaction ID: R60163
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Teresa S Anderson
Mailing Address 7115 Coachwood Drive
City: Georgetown | State: IN | Zip Code: 47122
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00

Date of Receipt: 11 15 2004
Transaction ID: R60572
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
R. Ted Antoon
Mailing Address 3917 Brownes Ferry Rd
City: Charlotte | State: NC | Zip Code: 28269
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-MidAtlRegKPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 10 / 18 / 2004
Transaction ID: R59650
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
R. Ted Antoon
Mailing Address 3917 Brownes Ferry Rd
City: Charlotte | State: NC | Zip Code: 28269
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-MidAtlRegKPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 11 / 01 / 2004
Transaction ID: R60241
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
R. Ted Antoon
Mailing Address 3917 Brownes Ferry Rd
City: Charlotte | State: NC | Zip Code: 28269
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-MidAtlRegKPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 11 / 15 / 2004
Transaction ID: R60650
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Martin Ardron
Mailing Address 77 Rising Hill Road
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Hosp Rehab-PRS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59791
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Martin Ardron
Mailing Address 77 Rising Hill Road
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Hosp Rehab-PRS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60181
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Martin Ardron
Mailing Address 77 Rising Hill Road
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Hosp Rehab-PRS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60580
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lauren Atkinson
Mailing Address 1390 Market Street #2912
City: San Francisco | State: CA | Zip Code: 94102
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 21 2004
Transaction ID: R60049
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Lauren Atkinson
Mailing Address 1390 Market Street #2912
City: San Francisco | State: CA | Zip Code: 94102
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 04 2004
Transaction ID: R60448
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Lauren Atkinson
Mailing Address 1390 Market Street #2912
City: San Francisco | State: CA | Zip Code: 94102
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 18 2004
Transaction ID: R60937
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dana L. Avant
Mailing Address 8635 Heronswood Cove
City: Memphis | State: TN | Zip Code: 38119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Oper Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 25 2004
Transaction ID: R60132
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Dana L. Avant
Mailing Address 8635 Heronswood Cove
City: Memphis | State: TN | Zip Code: 38119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Oper Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60752
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Grant T Averill
Mailing Address 10902 Bardstown Woods Court
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Implement Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 483.00
Date of Receipt: 10 18 2004
Transaction ID: R59772
Amount of Each Receipt this Period: 21.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **41.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 12 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Grant T Averill
Mailing Address 10902 Bardstown Woods Court
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Implement Svcs
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 463.00
Date of Receipt: 11 01 2004
Transaction ID: R60162
Amount of Each Receipt this Period: 21.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Grant T Averill
Mailing Address 10902 Bardstown Woods Court
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Implement Svcs
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 463.00
Date of Receipt: 11 15 2004
Transaction ID: R60571
Amount of Each Receipt this Period: 21.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Sheron A Bernard
Mailing Address 1937 Sr 16 West
City: Green Cove Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 25 2004
Transaction ID: R60085
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **52.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sharon A Barnard
Mailing Address 1937 Sr 16 West
City: Green Cove Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60484
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sharon A Barnard
Mailing Address 1937 Sr 16 West
City: Green Cove Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60816
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Bobby V Bas
Mailing Address 2084 Wind River Road
City: El Cajon | State: CA | Zip Code: 92019
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Radiology Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 25 2004
Transaction ID: R60086
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 35.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Bobby V Bas
Mailing Address 2084 Wind River Road
City: El Cajon | State: CA | Zip Code: 92019
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Radiology Mgr
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 08 2004
Transaction ID: R60485
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Bobby V Bas
Mailing Address 2084 Wind River Road
City: El Cajon | State: CA | Zip Code: 92019
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Radiology Mgr
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 22 2004
Transaction ID: R60798
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frank Battaferano
Mailing Address 2700 Little Hills Lane
City: Anchorage | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1150.00

Date of Receipt: 10 18 2004
Transaction ID: R59789
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **80.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frank BattaFarano
Mailing Address 2700 Little Hills Lane
City: Anchorage | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 01 2004
Transaction ID: R60189
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Frank BattaFarano
Mailing Address 2700 Little Hills Lane
City: Anchorage | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 15 2004
Transaction ID: R60598
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Barbara L Baylis
Mailing Address 6702 Kingslook Court
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Clin & Res Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 10 18 2004
Transaction ID: R59986
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Barbara L Baylis
Mailing Address 6702 Kingslook Court
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Clin & Res Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60359
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Barbara L Baylis
Mailing Address 6702 Kingslook Court
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Clin & Res Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60764
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kimberly Ann Beach
Mailing Address 3321 Buck Creek Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operation Sys-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59787
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kimberly Ann Beach
Mailing Address 3321 Buck Creek Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operation Sys-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60177
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kimberly Ann Beach
Mailing Address 3321 Buck Creek Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operation Sys-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60586
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael W Beal
Mailing Address 10 Glenwood Road
City: Windham | State: NH | Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-NE Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59915
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael W Beal
Mailing Address 10 Glenwood Road
City: Windham | State: NH | Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-NE Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60305
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael W Beal
Mailing Address 10 Glenwood Road
City: Windham | State: NH | Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-NE Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60711
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael J Bean
Mailing Address 8011 Kendrick Crossing Lane
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Tax Planning
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59826
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Bean
Mailing Address 8011 Kendrick Crossing Lane
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Tax Planning
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60216
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael J Bean
Mailing Address 8011 Kendrick Crossing Lane
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Tax Planning
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60625
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James E. Bell
Mailing Address 14213 Aiken Road
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Div Reimb-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59948
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James E. Bell
Mailing Address 14213 Aiken Road
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Div Reimb-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60340
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James E. Bell
Mailing Address 14213 Aiken Road
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Div Reimb-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60745
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Celeste M Bentley
Mailing Address 4 Stuart Drive
City: Barrington | State: NH | Zip Code: 03825
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59909
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Celeste M Bentley
Mailing Address 4 Stuart Drive
City: Barrington | State: NH | Zip Code: 03825
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60298
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Celeste M Bentley
Mailing Address 4 Stuart Drive
City: Barrington | State: NH | Zip Code: 03825
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60704
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Janet Bledron
Mailing Address 226 3rd Street
City: Dunellen | State: NJ | Zip Code: 08812
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 18 2004
Transaction ID: R59980
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janet Biedron
Mailing Address 226 3rd Street
City: Dunellen | State: NJ | Zip Code: 08812
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60352
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Janet Biedron
Mailing Address 226 3rd Street
City: Dunellen | State: NJ | Zip Code: 08812
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60758
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Linn Billingsley
Mailing Address P.O. Box 122
City: Blue Diamond | State: NV | Zip Code: 89004
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 10 21 2004
Transaction ID: R59985
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Linn Billingsley
Mailing Address P.O. Box 122
City: Blue Diamond | State: NV | Zip Code: 89004
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 11 04 2004
Transaction ID: R60393
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Linn Billingsley
Mailing Address P.O. Box 122
City: Blue Diamond | State: NV | Zip Code: 89004
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 11 18 2004
Transaction ID: R60883
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Anne Ruth Birdwell
Mailing Address 5450 Grundy Quarles Hwy
City: Bloomington Sprin | State: TN | Zip Code: 38545
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 25 2004
Transaction ID: R60123
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Anne Ruth Birdwell
Mailing Address 5450 Grundy Quarles Hwy
City: Bloomington Sprin | State: TN | Zip Code: 38545
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60523
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Anne Ruth Birdwell
Mailing Address 5450 Grundy Quarles Hwy
City: Bloomington Sprin | State: TN | Zip Code: 38545
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60857
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Peggy Black
Mailing Address 1807 Helmridge Court
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Asst to Chair & BOD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59827
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Peggy Black
Mailing Address 1607 Helmridge Court
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Asst to Chair & BOD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60218
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Peggy Black
Mailing Address 1607 Helmridge Court
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Asst to Chair & BOD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60627
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Karen R Blair
Mailing Address 9708 Northridge Dr
City: Louisville | State: KY | Zip Code: 40272
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Patient Acctng-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59842
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Karen R Blain
Mailing Address 9708 Northridge Dr
City: Louisville | State: KY | Zip Code: 40272
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Patient Accting-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60233
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Karen R Blain
Mailing Address 9708 Northridge Dr
City: Louisville | State: KY | Zip Code: 40272
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Patient Accting-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60642
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Gayla Bond
Mailing Address 7015 Wooded Meadow Rd
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59970
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gayle Bond
Mailing Address 7015 Wooded Meadow Rd
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60363
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gayle Bond
Mailing Address 7015 Wooded Meadow Rd
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60769
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Lane M Bowen
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 10 18 2004
Transaction ID: R59911
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Lane M Bowen
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 01 2004
Transaction ID: R60300
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Lane M Bowen
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 15 2004
Transaction ID: R60706
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kurt Brockhausen
Mailing Address 1105 19Th Avenue Sw
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 25 2004
Transaction ID: R60075
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **110.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kurt Brockhausen
Mailing Address 1105 19Th Avenue Sw
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60474
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kurt Brockhausen
Mailing Address 1105 19Th Avenue Sw
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60806
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gail Brockway
Mailing Address 8221 53rd avenue west #4B
City: Mukilteo | State: WA | Zip Code: 98275
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60114
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Gail Brockway
Mailing Address 8221 53rd avenue west #4B
City: Mukilteo | State: WA | Zip Code: 98275
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60514
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Gail Brockway
Mailing Address 8221 53rd avenue west #4B
City: Mukilteo | State: WA | Zip Code: 98275
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60848
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 6 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 10 18 2004
Transaction ID: R59885
Amount of Each Receipt this Period: 7.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **27.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 6 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 10 25 2004
Transaction ID: R60093
Amount of Each Receipt this Period: 7.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 6 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 11 01 2004
Transaction ID: R60284
Amount of Each Receipt this Period: 7.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 6 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 11 08 2004
Transaction ID: R60482
Amount of Each Receipt this Period: 7.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **21.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 8 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 11 11 2004
Transaction ID: R60548
Amount of Each Receipt this Period: 7.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Scott Bullock
Mailing Address 8 Evergreen Lane
City: Fiskdale | State: MA | Zip Code: 01518
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 329.00

Date of Receipt: 11 22 2004
Transaction ID: R60824
Amount of Each Receipt this Period: 7.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Syma Burton
Mailing Address 433 S. Plantation
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 25 2004
Transaction ID: R60118
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **29.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sylvia Burton
Mailing Address 433 S. Plantation
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 11 08 2004
Transaction ID: R60518
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sylvia Burton
Mailing Address 433 S. Plantation
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 11 22 2004
Transaction ID: R60852
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Julie Buterko
Mailing Address 1835 Franklin Street # 303
City: San Francisco | State: CA | Zip Code: 94109
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59927
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Julie Butenko
Mailing Address 1835 Franklin Street # 303
City: San Francisco | State: CA | Zip Code: 94109
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60318
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Julie Butenko
Mailing Address 1835 Franklin Street # 303
City: San Francisco | State: CA | Zip Code: 94109
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60724
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Garon
Mailing Address 2333 Brickell Avenue #1402
City: Miami | State: FL | Zip Code: 33129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 18 2004
Transaction ID: R59784
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John Caron
Mailing Address 2333 Brickell Avenue #1402
City: Miami | State: FL | Zip Code: 33129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60184
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John Caron
Mailing Address 2333 Brickell Avenue #1402
City: Miami | State: FL | Zip Code: 33129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60583
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Terry Cerico
Mailing Address 3311 Cobblers Ct
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Customer Supp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59783
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Terry Carrico
Mailing Address 3311 Cobblers Ct
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Customer Supp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60173
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Terry Carrico
Mailing Address 3311 Cobblers Ct
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Customer Supp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60582
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Brian L Deuell
Mailing Address 2808 Wareham Road
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HD Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 598.00

Date of Receipt: 10 18 2004
Transaction ID: R59847
Amount of Each Receipt this Period: 26.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **66.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Brian L Caudill
Mailing Address 2808 Wareham Road
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HD Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 598.00

Date of Receipt: 11 01 2004
Transaction ID: R60238
Amount of Each Receipt this Period: 26.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Brian L Caudill
Mailing Address 2808 Wareham Road
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HD Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 598.00

Date of Receipt: 11 15 2004
Transaction ID: R60647
Amount of Each Receipt this Period: 26.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Vicki Chaffins
Mailing Address 384 Loretta Drive
City: Shepherdsville | State: KY | Zip Code: 40165
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Acctng-Fixed Assets
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59853
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **62.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Vicki Chaffins
Mailing Address 384 Loretta Drive
City: Shepherdsville | State: KY | Zip Code: 40165
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Acctng-Fixed Assets
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60244
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Vicki Chaffins
Mailing Address 384 Loretta Drive
City: Shepherdsville | State: KY | Zip Code: 40165
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Acctng-Fixed Assets
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60653
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Richard E Chapman
Mailing Address 11200 Bodley Drive
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Adm & Info Off&SrVP
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1338.00

Date of Receipt: 10 18 2004
Transaction ID: R59777
Amount of Each Receipt this Period: 58.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **78.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard E Chapman
Mailing Address 11200 Badley Drive
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Adm & Info Off&SrVP
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1338.00

Date of Receipt: 11 01 2004
Transaction ID: R60167
Amount of Each Receipt this Period: 60.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Richard E Chapman
Mailing Address 11200 Badley Drive
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Adm & Info Off&SrVP
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1338.00

Date of Receipt: 11 15 2004
Transaction ID: R60576
Amount of Each Receipt this Period: 60.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Janet L Clancy
Mailing Address 10816 Briar Stone Lane
City: Fishers | State: IN | Zip Code: 46038
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60036
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **130.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janet L Clancy
Mailing Address 10816 Briar Stone Lane
City: Fishers | State: IN | Zip Code: 46038
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60435
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Janet L Clancy
Mailing Address 10816 Briar Stone Lane
City: Fishers | State: IN | Zip Code: 46038
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60924
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Christopher A Clements
Mailing Address 4704 Taylor St.
City: Hollywood | State: FL | Zip Code: 33021
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60013
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christopher A Clements
Mailing Address 4704 Taylor St.
City: Hollywood | State: FL | Zip Code: 33021
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60411
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Christopher A Clements
Mailing Address 4704 Taylor St.
City: Hollywood | State: FL | Zip Code: 33021
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60901
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Walter Collins
Mailing Address 24 Hearthstone Dr
City: Medfield | State: MA | Zip Code: 02052
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59962
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Walker Collins
Mailing Address 24 Hearthstone Dr
City: Medfield | State: MA | Zip Code: 02052
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60355
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Walker Collins
Mailing Address 24 Hearthstone Dr
City: Medfield | State: MA | Zip Code: 02052
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60761
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael Comer
Mailing Address 12 Lewis
City: Irvine | State: CA | Zip Code: 92620
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-West Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 10 18 2004
Transaction ID: R59864
Amount of Each Receipt this Period: 35.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael Comer
Mailing Address 12 Lewis
City: Irvine | State: CA | Zip Code: 92620
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-West Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 01 2004
Transaction ID: R60255
Amount of Each Receipt this Period: 35.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael Comer
Mailing Address 12 Lewis
City: Irvine | State: CA | Zip Code: 92620
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-West Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 15 2004
Transaction ID: R60664
Amount of Each Receipt this Period: 35.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Peter D Cortese
Mailing Address 3308 Overlook Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 380.00

Date of Receipt: 10 18 2004
Transaction ID: R59967
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 250
(check only one)
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Peter D Cordess
Mailing Address 3308 Overlook Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 380.00

Date of Receipt: 11 01 2004
Transaction ID: R60360
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Peter D Cordess
Mailing Address 3308 Overlook Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Human Resources-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 380.00

Date of Receipt: 11 15 2004
Transaction ID: R60765
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Carol Cregan
Mailing Address 2849 Ne 26Th Avenue
City: Ft Lauderdale | State: FL | Zip Code: 33308
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Dev-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59881
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carol Cregan
Mailing Address 2849 Ne 28Th Avenue
City: Ft Lauderdale | State: FL | Zip Code: 33306
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Dev-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60270
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Carol Cregan
Mailing Address 2849 Ne 28Th Avenue
City: Ft Lauderdale | State: FL | Zip Code: 33306
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Dev-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60679
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Norma Cross
Mailing Address 204 Highland Trail
City: Chapel Hill | State: NC | Zip Code: 27516
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Rehab-PRS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 10 25 2004
Transaction ID: R60126
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 250
(check only one)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Norine Cross
Mailing Address 204 Highland Trail
City: Chapel Hill | State: NC | Zip Code: 27516
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Rehab-PRS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 08 2004
Transaction ID: R60526
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Norine Cross
Mailing Address 204 Highland Trail
City: Chapel Hill | State: NC | Zip Code: 27516
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Rehab-PRS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 22 2004
Transaction ID: R60860
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Theresa Culver
Mailing Address 7024 Wooded Meadow Road
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 18 2004
Transaction ID: R59776
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Theresa Culver
Mailing Address 7024 Wooded Meadow Road
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60166
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Theresa Culver
Mailing Address 7024 Wooded Meadow Road
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60575
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Douglas Cumutte
Mailing Address 1014 Springside Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Fac & Real Estate Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 10 18 2004
Transaction ID: R59844
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 52.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Douglas Cumutte
Mailing Address 1014 Springside Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Fac & Real Estate Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 11 01 2004
Transaction ID: R60235
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Douglas Cumutte
Mailing Address 1014 Springside Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Fac & Real Estate Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 11 15 2004
Transaction ID: R60644
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Charles K. Currens
Mailing Address 7801 McCarthy Lane
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir IS Prod Svcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59947
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **44.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 250
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Charles K. Currens
Mailing Address 7801 McCarthy Lane
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir IS Prod Svcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60339
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Charles K. Currens
Mailing Address 7801 McCarthy Lane
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir IS Prod Svcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60744
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Timothy B Daugherty
Mailing Address 832 Rollingwood Ln
City: Ft. Wayne | State: IN | Zip Code: 46845
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 10 18 2004
Transaction ID: R59979
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy B Daugherty
Mailing Address 832 Rollingwood Ln
City: Ft. Wayne | State: IN | Zip Code: 46845
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 01 2004
Transaction ID: R60372
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Timothy B Daugherty
Mailing Address 832 Rollingwood Ln
City: Ft. Wayne | State: IN | Zip Code: 46845
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 15 2004
Transaction ID: R60779
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Joel W Day
Mailing Address 2017 Spring Farms Drive
City: Floyd Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59808
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joel W Day
Mailing Address 2017 Spring Farms Drive
City: Floyd Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60196
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Joel W Day
Mailing Address 2017 Spring Farms Drive
City: Floyd Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60607
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Carolyn F Deblasi
Mailing Address 1031 W. Antelope Creek Way
City: Tucson | State: AZ | Zip Code: 85737
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 18 2004
Transaction ID: R59939
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carolyn F Deblasi
Mailing Address 1031 W. Antelope Creek Way
City: Tucson | State: AZ | Zip Code: 85737
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 01 2004
Transaction ID: R60331
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Carolyn F Deblasi
Mailing Address 1031 W. Antelope Creek Way
City: Tucson | State: AZ | Zip Code: 85737
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 15 2004
Transaction ID: R60737
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mary L Dennison
Mailing Address 4878 Mount Eden Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 352.50
Date of Receipt: 10 18 2004
Transaction ID: R59823
Amount of Each Receipt this Period: 17.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **57.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mary L Dennison
Mailing Address 4678 Mount Eden Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 352.50
Date of Receipt: 11 01 2004
Transaction ID: R60213
Amount of Each Receipt this Period: 17.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mary L Dennison
Mailing Address 4678 Mount Eden Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 352.50
Date of Receipt: 11 15 2004
Transaction ID: R60622
Amount of Each Receipt this Period: 17.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Judith C Dexter
Mailing Address 4161 Ridge Road
City: Kingsport | State: TN | Zip Code: 37660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 10 21 2004
Transaction ID: R60029
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Judith C Dexter
Mailing Address 4161 Ridge Road
City: Kingsport | State: TN | Zip Code: 37660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 04 2004
Transaction ID: R60428
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Judith C Dexter
Mailing Address 4161 Ridge Road
City: Kingsport | State: TN | Zip Code: 37660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 18 2004
Transaction ID: R60918
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Paul J Diaz
Mailing Address 10411 Aubinoe Farm Drive
City: Bethesda | State: MD | Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00

Date of Receipt: 11 04 2004
Transaction ID: R60389
Amount of Each Receipt this Period: 2500.00
Check

SUBTOTAL of Receipts This Page (optional) ▶ **2540.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Donna Susan Dickerson
Mailing Address 5283 Pryor Road
City: Maryville | State: TN | Zip Code: 37804
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60038
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Donna Susan Dickerson
Mailing Address 5283 Pryor Road
City: Maryville | State: TN | Zip Code: 37804
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60437
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Donna Susan Dickerson
Mailing Address 5283 Pryor Road
City: Maryville | State: TN | Zip Code: 37804
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60926
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michele Dionne
Mailing Address 229 E. 85th Street
City: Willowbrook | State: IL | Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 10 21 2004
Transaction ID: R60056
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michele Dionne
Mailing Address 229 E. 85th Street
City: Willowbrook | State: IL | Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 04 2004
Transaction ID: R60455
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michele Dionne
Mailing Address 229 E. 85th Street
City: Willowbrook | State: IL | Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 18 2004
Transaction ID: R60944
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Stephen M Dobler
Mailing Address 2703 Trumpetvine Rd.
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Finance & Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 815.00

Date of Receipt: 10 18 2004
Transaction ID: R59782
Amount of Each Receipt this Period: 35.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Stephen M Dobler
Mailing Address 2703 Trumpetvine Rd.
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Finance & Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 815.00

Date of Receipt: 11 01 2004
Transaction ID: R60172
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Stephen M Dobler
Mailing Address 2703 Trumpetvine Rd.
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Finance & Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 815.00

Date of Receipt: 11 15 2004
Transaction ID: R605B1
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Deborah R Doddridge
Mailing Address 312 Hill St. PO Box 273
City: Milltown | State: IN | Zip Code: 47145
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Purch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59807
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Deborah R Doddridge
Mailing Address 312 Hill St. PO Box 273
City: Milltown | State: IN | Zip Code: 47145
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Purch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60197
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Deborah R Doddridge
Mailing Address 312 Hill St. PO Box 273
City: Milltown | State: IN | Zip Code: 47145
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Mgr Purch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60606
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Charles D Dotan
Mailing Address 7644 Harbour Blvd.
City: Miramar | State: FL | Zip Code: 33023
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 25 2004
Transaction ID: R60077
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Charles D Dotan
Mailing Address 7644 Harbour Blvd.
City: Miramar | State: FL | Zip Code: 33023
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 08 2004
Transaction ID: R60476
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Charles D Dotan
Mailing Address 7644 Harbour Blvd.
City: Miramar | State: FL | Zip Code: 33023
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 22 2004
Transaction ID: R60808
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Elizabeth D Dubois
Mailing Address 21 Harriman Road
City: Hudson | State: MA | Zip Code: 01749
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59898
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Elizabeth D Dubois
Mailing Address 21 Harriman Road
City: Hudson | State: MA | Zip Code: 01749
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60287
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Elizabeth D Dubois
Mailing Address 21 Harriman Road
City: Hudson | State: MA | Zip Code: 01749
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60684
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Susan B Dyer
Mailing Address 959 Whetstone Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-CentralRegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59871
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Susan B Dyer
Mailing Address 959 Whetstone Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-CentralRegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60262
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Susan B Dyer
Mailing Address 959 Whetstone Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-CentralRegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60671
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy R Eaton
Mailing Address 4252 Desert Highlands Dr
City: Sparks | State: NV | Zip Code: 89436
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 10 25 2004
Transaction ID: R60073
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Timothy R Eaton
Mailing Address 4252 Desert Highlands Dr
City: Sparks | State: NV | Zip Code: 89436
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 08 2004
Transaction ID: R60472
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Timothy R Eaton
Mailing Address 4252 Desert Highlands Dr
City: Sparks | State: NV | Zip Code: 89436
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 22 2004
Transaction ID: R60804
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Danny R Edwards
Mailing Address 1112 Hunt Club Lane
City: Valrico | State: FL | Zip Code: 33594
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off III-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 21 2004
Transaction ID: R60046
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Danny R Edwards
Mailing Address 1112 Hunt Club Lane
City: Valrico | State: FL | Zip Code: 33594
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off III-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 04 2004
Transaction ID: R60445
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Danny R Edwards
Mailing Address 1112 Hunt Club Lane
City: Valrico | State: FL | Zip Code: 33594
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off III-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 18 2004
Transaction ID: R60934
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Paul R. Eiseman
Mailing Address 3714 Fringe Tree Place
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Business Dev-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59954
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Paul R. Eiseman
Mailing Address 3714 Fringe Tree Place
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Business Dev-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60346
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Paul R. Eiseman
Mailing Address 3714 Fringe Tree Place
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Business Dev-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60751
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Andrew G Escamilla
Mailing Address 78 Waltham Street
Unit PH
City: Boston | State: MA | Zip Code: 02118
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60012
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Andrew G Escamilla
Mailing Address 78 Waltham Street
Unit PH
City: Boston | State: MA | Zip Code: 02118
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60410
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Andrew G Escamilla
Mailing Address 78 Waltham Street
Unit PH
City: Boston | State: MA | Zip Code: 02118
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60900
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mona Euler
Mailing Address 11325 Moss Dr
City: Carmel | State: IN | Zip Code: 46033
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 21 2004
Transaction ID: R59992
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mona Euler
Mailing Address 11325 Moss Dr
City: Carmel | State: IN | Zip Code: 46033
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 04 2004
Transaction ID: R60380
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mona Euler
Mailing Address 11325 Moss Dr
City: Carmel | State: IN | Zip Code: 46033
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 18 2004
Transaction ID: R60880
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John Ferko
Mailing Address 220 Ohio Ave
City: Glassport | State: PA | Zip Code: 15045
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 10 25 2004
Transaction ID: R60080
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John Ferko
Mailing Address 220 Ohio Ave
City: Glassport | State: PA | Zip Code: 15045
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 11 08 2004
Transaction ID: R60479
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John Ferko
Mailing Address 220 Ohio Ave
City: Glassport | State: PA | Zip Code: 15045
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 280.00

Date of Receipt: 11 22 2004
Transaction ID: R60811
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Debra Forman
Mailing Address 11009 Walnut Creek
City: Knoxville | State: TN | Zip Code: 37932
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59910
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Debra Forman
Mailing Address 11009 Walnut Creek
City: Knoxville | State: TN | Zip Code: 37932
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60289
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Debra Forman
Mailing Address 11009 Walnut Creek
City: Knoxville | State: TN | Zip Code: 37932
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R607D5
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 18 2004
Transaction ID: R59890
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 25 2004
Transaction ID: R60092
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 01 2004
Transaction ID: R60279
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 08 2004
Transaction ID: R60491
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60545
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Susan M Fortin
Mailing Address 48 Half Moon Terrace
City: Colchester | State: VT | Zip Code: 05446
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 22 2004
Transaction ID: R60823
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Larry Foster
Mailing Address 5700 N. Winthrop
Apartment # 5
City: Chicago | State: IL | Zip Code: 60660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R59998
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Larry Foster
Mailing Address 5700 N. Winthrop
Apartment # 5
City: Chicago | State: IL | Zip Code: 60660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60396
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Larry Foster
Mailing Address 5700 N. Winthrop
Apartment # 5
City: Chicago | State: IL | Zip Code: 60660
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60886
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mary Jane Frappier-Neff
Mailing Address 5270 Sommerville Drive
City: Rockledge | State: FL | Zip Code: 32955
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Reg IS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59766
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mary Jane Frappier-Neff
Mailing Address 5270 Sommerville Drive
City: Rockledge | State: FL | Zip Code: 32955
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Reg IS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60156
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mary Jane Frappier-Neff
Mailing Address 5270 Sommerville Drive
City: Rockledge | State: FL | Zip Code: 32955
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Reg IS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60585
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 73 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Joyce L Freville
Mailing Address 10418 Dove Chase Circle
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Compl Fin
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59818
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Joyce L Freville
Mailing Address 10418 Dove Chase Circle
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Compl Fin
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60208
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Joyce L Freville
Mailing Address 10418 Dove Chase Circle
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Compl Fin
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60617
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 250
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven J Fuller
Mailing Address 6025 Bridge Garden Rd
City: Knoxville | State: TN | Zip Code: 37912
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 18 2004
Transaction ID: R59857
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Steven J Fuller
Mailing Address 6025 Bridge Garden Rd
City: Knoxville | State: TN | Zip Code: 37912
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60248
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Steven J Fuller
Mailing Address 6025 Bridge Garden Rd
City: Knoxville | State: TN | Zip Code: 37912
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60657
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 75 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Alisa Gerke
Mailing Address 834 St Mary'S St
City: Depere | State: WI | Zip Code: 54115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59934
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Alisa Gerke
Mailing Address 834 St Mary'S St
City: Depere | State: WI | Zip Code: 54115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60325
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Alisa Gerke
Mailing Address 834 St Mary'S St
City: Depere | State: WI | Zip Code: 54115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60731
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59756
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60028
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60148
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60426
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60554
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Getts
Mailing Address 15 Evergreen Circle
City: Henniker | State: NH | Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 18 2004
Transaction ID: R60916
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Patrick J Gillenwater
Mailing Address 402 Erin Drive
City: Jeffersonville | State: IN | Zip Code: 47130
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir IS Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 402.50

Date of Receipt: 10 18 2004
Transaction ID: R59775
Amount of Each Receipt this Period: 17.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Patrick J Gillenwater
Mailing Address 402 Erin Drive
City: Jeffersonville | State: IN | Zip Code: 47130
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir IS Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 402.50

Date of Receipt: 11 01 2004
Transaction ID: R60165
Amount of Each Receipt this Period: 17.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Patrick J Gillenwater
Mailing Address 402 Erin Drive
City: Jeffersonville | State: IN | Zip Code: 47130
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir IS Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 402.50

Date of Receipt: 11 15 2004
Transaction ID: R60574
Amount of Each Receipt this Period: 17.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 52.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Catherine A Gooch
Mailing Address 14516 Clear Meadow Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59771
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Catherine A Gooch
Mailing Address 14516 Clear Meadow Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60161
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Catherine A Gooch
Mailing Address 14516 Clear Meadow Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60570
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
James Grady
Mailing Address 1105 Meadow Court
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59937
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
James Grady
Mailing Address 1105 Meadow Court
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60329
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
James Grady
Mailing Address 1105 Meadow Court
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60735
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Theresa M Graham
Mailing Address 1203 Falls Creek Landing
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Compliance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 10 18 2004
Transaction ID: R59810
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Theresa M Graham
Mailing Address 1203 Falls Creek Landing
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Compliance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 11 01 2004
Transaction ID: R60200
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Theresa M Graham
Mailing Address 1203 Falls Creek Landing
City: New Albany | State: IN | Zip Code: 47150
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Compliance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 11 15 2004
Transaction ID: R60609
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Charles Michael Grennan
Mailing Address 7109 Cannonade Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Purchasing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 584.00

Date of Receipt: 10 18 2004
Transaction ID: R59814
Amount of Each Receipt this Period: 28.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Charles Michael Grennan
Mailing Address 7109 Cannonade Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Purchasing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 584.00

Date of Receipt: 11 01 2004
Transaction ID: R60204
Amount of Each Receipt this Period: 28.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Charles Michael Grennan
Mailing Address 7109 Cannonade Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Purchasing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 584.00

Date of Receipt: 11 15 2004
Transaction ID: R60613
Amount of Each Receipt this Period: 28.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **84.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Frederick A. Green
Mailing Address 6928 Pershing
City: Berwyn | State: IL | Zip Code: 60402
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60055
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Frederick A. Green
Mailing Address 6928 Pershing
City: Berwyn | State: IL | Zip Code: 60402
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60454
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frederick A. Green
Mailing Address 6928 Pershing
City: Berwyn | State: IL | Zip Code: 60402
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off II-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60943
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John Griffes
Mailing Address 2727 Marlborough
City: San Antonio | State: TX | Zip Code: 78230
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59689
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John Griffes
Mailing Address 2727 Marlborough
City: San Antonio | State: TX | Zip Code: 78230
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60278
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John Griffes
Mailing Address 2727 Marlborough
City: San Antonio | State: TX | Zip Code: 78230
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60687
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Gross
Mailing Address 6133 Rolfe Avenue
City: Norfolk | State: VA | Zip Code: 23508
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 25 2004
Transaction ID: R60079
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John Gross
Mailing Address 6133 Rolfe Avenue
City: Norfolk | State: VA | Zip Code: 23508
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 08 2004
Transaction ID: R60478
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Gross
Mailing Address 6133 Rolfe Avenue
City: Norfolk | State: VA | Zip Code: 23508
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 22 2004
Transaction ID: R60810
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Kellye M Gross
Mailing Address 4813 Sunpoint Circle Apt #418
City: Indianapolis | State: IN | Zip Code: 46237
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 21 2004
Transaction ID: R60006
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kellye M Gross
Mailing Address 4813 Sunpoint Circle Apt #418
City: Indianapolis | State: IN | Zip Code: 46237
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 04 2004
Transaction ID: R60404
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Kellye M Gross
Mailing Address 4813 Sunpoint Circle Apt #418
City: Indianapolis | State: IN | Zip Code: 46237
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 18 2004
Transaction ID: R60884
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dennis J Hansen
Mailing Address 1791 Connor Station Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Reimb-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59816
Amount of Each Receipt this Period: 35.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Dennis J Hansen
Mailing Address 1791 Connor Station Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Reimb-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60206
Amount of Each Receipt this Period: 35.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Dennis J Hansen
Mailing Address 1791 Connor Station Road
City: Simpsonville | State: KY | Zip Code: 40067
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Reimb-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60615
Amount of Each Receipt this Period: 35.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **105.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Teri A Hartage
Mailing Address 4005 Landerr Drive
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Asst Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59831
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Teri A Hartage
Mailing Address 4005 Landerr Drive
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Asst Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60222
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Teri A Hartage
Mailing Address 4005 Landerr Drive
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Asst Treasurer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60631
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 10 14 2004
Transaction ID: R59757
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 10 21 2004
Transaction ID: R60052
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 10 28 2004
Transaction ID: R60149
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 04 2004
Transaction ID: R60451
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 11 2004
Transaction ID: R60556
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kathleen Hawk-Rigney
Mailing Address 23 Warner Street
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 18 2004
Transaction ID: R60940
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 01 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
David G Henderson
Mailing Address 1313 St. Anthony Place Suite 5E
City: Louisville | State: KY | Zip Code: 40204
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Central Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: RS9917
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
David G Henderson
Mailing Address 1313 St. Anthony Place Suite 5E
City: Louisville | State: KY | Zip Code: 40204
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Central Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60306
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
David G Henderson
Mailing Address 1313 St. Anthony Place Suite 5E
City: Louisville | State: KY | Zip Code: 40204
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Central Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60714
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 02 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sally I Hoffmann
Mailing Address 31031 Whitlock Drive
City: Wesley Chapel | State: FL | Zip Code: 33543
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 245.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59884
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sally I Hoffmann
Mailing Address 31031 Whitlock Drive
City: Wesley Chapel | State: FL | Zip Code: 33543
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 245.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60273
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Sally I Hoffmann
Mailing Address 31031 Whitlock Drive
City: Wesley Chapel | State: FL | Zip Code: 33543
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 245.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R806B2
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 03 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Marsha Hogg
Mailing Address 4866 SW 32nd. Terr.
City: Dania | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Oper Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 21 2004
Transaction ID: R60005
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Marsha Hogg
Mailing Address 4866 SW 32nd. Terr.
City: Dania | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Oper Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 04 2004
Transaction ID: R60403
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Marsha Hogg
Mailing Address 4866 SW 32nd. Terr.
City: Dania | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Oper Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 18 2004
Transaction ID: R60883
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Holcomb
Mailing Address 317 30Th Avenue N.E.
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60106
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James Holcomb
Mailing Address 317 30Th Avenue N.E.
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60506
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James Holcomb
Mailing Address 317 30Th Avenue N.E.
City: Great Falls | State: MT | Zip Code: 59404
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60839
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 05 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Carol Holguin
Mailing Address 504 Steeplechase Trail
City: Kennedale | State: TX | Zip Code: 76060
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 10 25 2004
Transaction ID: R60135
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Carol Holguin
Mailing Address 504 Steeplechase Trail
City: Kennedale | State: TX | Zip Code: 76060
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 11 08 2004
Transaction ID: R60534
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Carol Holguin
Mailing Address 504 Steeplechase Trail
City: Kennedale | State: TX | Zip Code: 76060
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 11 22 2004
Transaction ID: R60868
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Richard A. Hood
Mailing Address 3440 Brian Rd South
City: Palm Harbor | State: FL | Zip Code: 34685
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-SE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59952
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Richard A. Hood
Mailing Address 3440 Brian Rd South
City: Palm Harbor | State: FL | Zip Code: 34685
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-SE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60344
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Richard A. Hood
Mailing Address 3440 Brian Rd South
City: Palm Harbor | State: FL | Zip Code: 34685
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-SE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60749
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 07 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Nancy Hubler
Mailing Address 10511 Buckeye Trace
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59932
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Nancy Hubler
Mailing Address 10511 Buckeye Trace
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60323
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Nancy Hubler
Mailing Address 10511 Buckeye Trace
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60729
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Theresa Hunkins
Mailing Address 9356 NW 8 Circle
City: Plantation | State: FL | Zip Code: 33324
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 10 18 2004
Transaction ID: R59872
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Theresa Hunkins
Mailing Address 9356 NW 8 Circle
City: Plantation | State: FL | Zip Code: 33324
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 01 2004
Transaction ID: R60263
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Theresa Hunkins
Mailing Address 9356 NW 8 Circle
City: Plantation | State: FL | Zip Code: 33324
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 15 2004
Transaction ID: R60672
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 250
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 18 2004
Transaction ID: R59944
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 25 2004
Transaction ID: R60129
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 01 2004
Transaction ID: R60336
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 08 2004
Transaction ID: R60529
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60555
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael Isabella
Mailing Address 82 Longfellow Road
City: Worcester | State: MA | Zip Code: 01602
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 22 2004
Transaction ID: R60863
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
E. Jane Jackson
Mailing Address 20769 Cross Timber Drive
City: Ashburn | State: VA | Zip Code: 20147
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59882
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
E. Jane Jackson
Mailing Address 20769 Cross Timber Drive
City: Ashburn | State: VA | Zip Code: 20147
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60271
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
E. Jane Jackson
Mailing Address 20769 Cross Timber Drive
City: Ashburn | State: VA | Zip Code: 20147
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60680
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Jarecki
Mailing Address 5165 W. Pine Bluff Dr.
City: New Palestine | State: IN | Zip Code: 46163
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 21 2004
Transaction ID: R60044
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Jeffrey Jarecki
Mailing Address 5165 W. Pine Bluff Dr.
City: New Palestine | State: IN | Zip Code: 46163
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 04 2004
Transaction ID: R60443
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Jeffrey Jarecki
Mailing Address 5165 W. Pine Bluff Dr.
City: New Palestine | State: IN | Zip Code: 46163
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 18 2004
Transaction ID: R60932
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tamila Johnson-White
Mailing Address 2815 Zhale Smith Rd.
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 18 2004
Transaction ID: R59980
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Tamila Johnson-White
Mailing Address 2815 Zhale Smith Rd.
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 01 2004
Transaction ID: R60373
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Tamila Johnson-White
Mailing Address 2815 Zhale Smith Rd.
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Util Svcs-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 15 2004
Transaction ID: R60780
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 250
(check only one)
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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Randy E Johnson
Mailing Address 5208 Grandlake
City: Bellaire | State: TX | Zip Code: 77401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60045
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Randy E Johnson
Mailing Address 5208 Grandlake
City: Bellaire | State: TX | Zip Code: 77401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60444
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Randy E Johnson
Mailing Address 5208 Grandlake
City: Bellaire | State: TX | Zip Code: 77401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60933
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy W Jolly
Mailing Address 6703 Kingslook Ct
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Planning & Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59841
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Timothy W Jolly
Mailing Address 6703 Kingslook Ct
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Planning & Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60232
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Timothy W Jolly
Mailing Address 6703 Kingslook Ct
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Planning & Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60641
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott M Juetten
Mailing Address 8315 Running Spring Dr
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59852
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Scott M Juetten
Mailing Address 8315 Running Spring Dr
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60243
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Scott M Juetten
Mailing Address 8315 Running Spring Dr
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Controller-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60652
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Pete Kalmey
Mailing Address 8508 Atrium Drive
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59685
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Pete Kalmey
Mailing Address 8508 Atrium Drive
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60274
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Pete Kalmey
Mailing Address 8508 Atrium Drive
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60683
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Donna Kelsey
Mailing Address 12774 S. Whisper Wind Place
City: Draper | State: UT | Zip Code: 84020
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Pacific Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 10 18 2004
Transaction ID: R59902
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Donna Kelsey
Mailing Address 12774 S. Whisper Wind Place
City: Draper | State: UT | Zip Code: 84020
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Pacific Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 01 2004
Transaction ID: R60291
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Donna Kelsey
Mailing Address 12774 S. Whisper Wind Place
City: Draper | State: UT | Zip Code: 84020
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Pacific Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 15 2004
Transaction ID: R60687
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Susan A Kesterson
Mailing Address 2334 Heritage Dr
City: Corona | State: CA | Zip Code: 92882
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59925
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Susan A Kesterson
Mailing Address 2334 Heritage Dr
City: Corona | State: CA | Zip Code: 92882
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60316
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Susan A Kesterson
Mailing Address 2334 Heritage Dr
City: Corona | State: CA | Zip Code: 92882
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60722
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶	45.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Edmund R Kothapally
Mailing Address 518 Lymington Ct
City: Louisville | State: KY | Zip Code: 40243
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59789
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Edmund R Kothapally
Mailing Address 518 Lymington Ct
City: Louisville | State: KY | Zip Code: 40243
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60179
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edmund R Kothapally
Mailing Address 518 Lymington Ct
City: Louisville | State: KY | Zip Code: 40243
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Prog Ana Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60588
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Keith Krein
Mailing Address 7212 Deer Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 10 18 2004
Transaction ID: R59976
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Keith Krein
Mailing Address 7212 Deer Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 11 01 2004
Transaction ID: R60369
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Keith Krein
Mailing Address 7212 Deer Ridge Rd
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 11 15 2004
Transaction ID: R60776
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward L Kuntz
Mailing Address 8807 Stable Crest Boulevard
City: Houston | State: TX | Zip Code: 77024
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Chairman
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2300.00

Date of Receipt: 10 18 2004
Transaction ID: R59803
Amount of Each Receipt this Period: 100.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Edward L Kuntz
Mailing Address 8807 Stable Crest Boulevard
City: Houston | State: TX | Zip Code: 77024
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Chairman
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2300.00

Date of Receipt: 11 01 2004
Transaction ID: R60183
Amount of Each Receipt this Period: 100.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Edward L Kuntz
Mailing Address 8807 Stable Crest Boulevard
City: Houston | State: TX | Zip Code: 77024
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Exec Chairman
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2300.00

Date of Receipt: 11 15 2004
Transaction ID: R60602
Amount of Each Receipt this Period: 100.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 18 2004
Transaction ID: R59900
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 25 2004
Transaction ID: R60094
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 01 2004
Transaction ID: R60289
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 08 2004
Transaction ID: R60493
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60549
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Terrance Kuzman
Mailing Address 34 Miller Drive
City: Somers | State: CT | Zip Code: 06071
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 22 2004
Transaction ID: R60825
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59754
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60023
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60146
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60421
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60552
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Anthony D Lacke
Mailing Address 95 Caesar Chelor Dr
City: Wrentham | State: MA | Zip Code: 02093
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 18 2004
Transaction ID: R60911
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mark A Lasmmle
Mailing Address 2224 Highland Springs Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Finance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 713.00

Date of Receipt: 10 18 2004
Transaction ID: R59843
Amount of Each Receipt this Period: 31.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mark A Lasmmle
Mailing Address 2224 Highland Springs Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Finance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 713.00

Date of Receipt: 11 01 2004
Transaction ID: R60234
Amount of Each Receipt this Period: 31.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mark A Lasmmle
Mailing Address 2224 Highland Springs Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Finance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 713.00

Date of Receipt: 11 15 2004
Transaction ID: R60643
Amount of Each Receipt this Period: 31.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **93.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Aryendra Lajie
Mailing Address 10241 SW 13th Street
City: Pembroke Pines, Fl | State: FL | Zip Code: 33025
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Asst Dir Fin-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59956
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Aryendra Lajie
Mailing Address 10241 SW 13th Street
City: Pembroke Pines, Fl | State: FL | Zip Code: 33025
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Asst Dir Fin-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60348
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Aryendra Lajie
Mailing Address 10241 SW 13th Street
City: Pembroke Pines, Fl | State: FL | Zip Code: 33025
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Asst Dir Fin-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60754
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph Landenwich
Mailing Address 2213 Wrocklage Ave.
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPCrpLegalAffairs&CrpSec
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00
Date of Receipt: 10 18 2004
Transaction ID: R59835
Amount of Each Receipt this Period: 60.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Joseph Landenwich
Mailing Address 2213 Wrocklage Ave.
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPCrpLegalAffairs&CrpSec
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00
Date of Receipt: 11 01 2004
Transaction ID: R60226
Amount of Each Receipt this Period: 60.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Joseph Landenwich
Mailing Address 2213 Wrocklage Ave.
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPCrpLegalAffairs&CrpSec
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00
Date of Receipt: 11 15 2004
Transaction ID: R60635
Amount of Each Receipt this Period: 60.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 180.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Judy Lange
Mailing Address 125 Judah Court
City: Folsom | State: CA | Zip Code: 95630
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off I-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 25 2004
Transaction ID: R60067
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Judy Lange
Mailing Address 125 Judah Court
City: Folsom | State: CA | Zip Code: 95630
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off I-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 08 2004
Transaction ID: R60466
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Judy Lange
Mailing Address 125 Judah Court
City: Folsom | State: CA | Zip Code: 95630
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off I-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 22 2004
Transaction ID: R60789
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Jacqueline Lanter
Mailing Address 2355 W Noble Heights Drive
City: Tucson | State: AZ | Zip Code: 85742
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 21 2004
Transaction ID: R60059
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Jacqueline Lanter
Mailing Address 2355 W Noble Heights Drive
City: Tucson | State: AZ | Zip Code: 85742
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 04 2004
Transaction ID: R60458
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Jacqueline Lanter
Mailing Address 2355 W Noble Heights Drive
City: Tucson | State: AZ | Zip Code: 85742
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 18 2004
Transaction ID: R60947
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Charles E Leanhart
Mailing Address 1200 Twin Willows Lane
City: Louisville | State: KY | Zip Code: 40214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir AP
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59838
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Charles E Leanhart
Mailing Address 1200 Twin Willows Lane
City: Louisville | State: KY | Zip Code: 40214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir AP
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60229
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Charles E Leanhart
Mailing Address 1200 Twin Willows Lane
City: Louisville | State: KY | Zip Code: 40214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir AP
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60638
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard A Lechleiter
Mailing Address 601 Club Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & CFO
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1426.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59834
Amount of Each Receipt this Period: 62.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Richard A Lechleiter
Mailing Address 601 Club Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & CFO
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1426.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60225
Amount of Each Receipt this Period: 62.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Richard A Lechleiter
Mailing Address 601 Club Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & CFO
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1426.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60634
Amount of Each Receipt this Period: 62.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **186.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Patricia Pruden Lennox
Mailing Address 11 Cider Mill Road
City: Medway | State: MA | Zip Code: 02053
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg DirSales&CommunRelHSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59942
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Patricia Pruden Lennox
Mailing Address 11 Cider Mill Road
City: Medway | State: MA | Zip Code: 02053
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg DirSales&CommunRelHSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60334
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Patricia Pruden Lennox
Mailing Address 11 Cider Mill Road
City: Medway | State: MA | Zip Code: 02053
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg DirSales&CommunRelHSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60740
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James L Lindberg
Mailing Address 11119 Brook Stone Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Facilities-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59804
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James L Lindberg
Mailing Address 11119 Brook Stone Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Facilities-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60184
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James L Lindberg
Mailing Address 11119 Brook Stone Court
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Facilities-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60603
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ronald D Long
Mailing Address 148 Cheyenne Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Contract Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59945
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ronald D Long
Mailing Address 148 Cheyenne Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Contract Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60337
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ronald D Long
Mailing Address 148 Cheyenne Road
City: Shelbyville | State: KY | Zip Code: 40065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Dir Contract Admin
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60742
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael C Lozier
Mailing Address 5106 Creekwood Drive
City: Greenville | State: IN | Zip Code: 47124
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Contract Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 213.50

Date of Receipt: 10 18 2004
Transaction ID: R59812
Amount of Each Receipt this Period: 9.50
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Michael C Lozier
Mailing Address 5106 Creekwood Drive
City: Greenville | State: IN | Zip Code: 47124
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Contract Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 213.50

Date of Receipt: 11 01 2004
Transaction ID: R60202
Amount of Each Receipt this Period: 9.50
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael C Lozier
Mailing Address 5106 Creekwood Drive
City: Greenville | State: IN | Zip Code: 47124
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Contract Admin
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 213.50

Date of Receipt: 11 15 2004
Transaction ID: R60611
Amount of Each Receipt this Period: 9.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **28.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Lucchese
Mailing Address 14401 Broad Oak Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Fin & Controller
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 630.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59832
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John Lucchese
Mailing Address 14401 Broad Oak Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Fin & Controller
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 630.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60223
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Lucchese
Mailing Address 14401 Broad Oak Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Fin & Controller
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 630.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60632
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey F Luckett
Mailing Address 1406 Hawkshead Ln
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Internal Audit-IS
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59786
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Jeffrey F Luckett
Mailing Address 1406 Hawkshead Ln
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Internal Audit-IS
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60176
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Jeffrey F Luckett
Mailing Address 1406 Hawkshead Ln
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Internal Audit-IS
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60585
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Ronald R Luken
Mailing Address 6760 E. 9Th Street
City: Indianapolis | State: IN | Zip Code: 46219
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60088
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ronald R Luken
Mailing Address 6760 E. 9Th Street
City: Indianapolis | State: IN | Zip Code: 46219
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60487
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ronald R Luken
Mailing Address 6760 E. 9Th Street
City: Indianapolis | State: IN | Zip Code: 46219
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60819
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Ruth Ann Lusk
Mailing Address 1800 Acorn Lane
City: Lagrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59837
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ruth Ann Lusk
Mailing Address 1800 Acorn Lane
City: Lagrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60228
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ruth Ann Lusk
Mailing Address 1800 Acorn Lane
City: Lagrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-East Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60637
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Adrienne Lyons
Mailing Address 1220 North Oak Park Avenue
City: Oak Park | State: IL | Zip Code: 60302
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59792
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Adrienne Lyons
Mailing Address 1220 North Oak Park Avenue
City: Oak Park | State: IL | Zip Code: 60302
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60182
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Adrienne Lyons
Mailing Address 1220 North Oak Park Avenue
City: Oak Park | State: IL | Zip Code: 60302
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60581
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 250
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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Wayne MacKey
Mailing Address 6 Belmore Road
City: Merrimac | State: MA | Zip Code: 01860
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir HR-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59899
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Wayne MacKey
Mailing Address 6 Belmore Road
City: Merrimac | State: MA | Zip Code: 01860
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir HR-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60288
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Wayne MacKey
Mailing Address 6 Belmore Road
City: Merrimac | State: MA | Zip Code: 01860
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir HR-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60685
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janis L Mahoney
Mailing Address 3403 S. Highway 53
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Technical Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 10 18 2004
Transaction ID: R59770
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Janis L Mahoney
Mailing Address 3403 S. Highway 53
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Technical Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60160
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Janis L Mahoney
Mailing Address 3403 S. Highway 53
City: LaGrange | State: KY | Zip Code: 40031
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Technical Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60569
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
James Melady
Mailing Address 954 Lindfield Dr.
City: Library | State: PA | Zip Code: 15129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60081
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
James Melady
Mailing Address 954 Lindfield Dr.
City: Library | State: PA | Zip Code: 15129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60480
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
James Melady
Mailing Address 954 Lindfield Dr.
City: Library | State: PA | Zip Code: 15129
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60812
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Keith A Mandrell
Mailing Address 8813 Mallow Drive
City: Knoxville | State: TN | Zip Code: 37922
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60040
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Keith A Mandrell
Mailing Address 8813 Mallow Drive
City: Knoxville | State: TN | Zip Code: 37922
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60439
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Keith A Mandrell
Mailing Address 8813 Mallow Drive
City: Knoxville | State: TN | Zip Code: 37922
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60928
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Katheryn J Markham
Mailing Address 10602 Taylor Farm Ct
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Planning&FieldSvcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 10 18 2004
Transaction ID: R59768
Amount of Each Receipt this Period: 35.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Katheryn J Markham
Mailing Address 10602 Taylor Farm Ct
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Planning&FieldSvcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 01 2004
Transaction ID: R60156
Amount of Each Receipt this Period: 35.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Katheryn J Markham
Mailing Address 10602 Taylor Farm Ct
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Planning&FieldSvcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 805.00

Date of Receipt: 11 15 2004
Transaction ID: R60567
Amount of Each Receipt this Period: 35.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **105.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Michael Mc Nelly
Mailing Address 1502 Hillsdale Drive
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59885
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael Mc Nelly
Mailing Address 1502 Hillsdale Drive
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60256
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael Mc Nelly
Mailing Address 1502 Hillsdale Drive
City: Cookeville | State: TN | Zip Code: 38506
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60665
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 139 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mark A McCullough
Mailing Address 1101 Old Cannons Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-KPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00

Date of Receipt: 10 18 2004
Transaction ID: R59870
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mark A McCullough
Mailing Address 1101 Old Cannons Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-KPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00

Date of Receipt: 11 01 2004
Transaction ID: R60261
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mark A McCullough
Mailing Address 1101 Old Cannons Lane
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: President-KPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 520.00

Date of Receipt: 11 15 2004
Transaction ID: R60670
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Patricia M McGillen
Mailing Address 510 Altagate Rd
City: Louisville | State: KY | Zip Code: 40206
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Quality & Risk Mgmt-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 10 18 2004
Transaction ID: R59963
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Patricia M McGillen
Mailing Address 510 Altagate Rd
City: Louisville | State: KY | Zip Code: 40206
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Quality & Risk Mgmt-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 01 2004
Transaction ID: R60356
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Patricia M McGillen
Mailing Address 510 Altagate Rd
City: Louisville | State: KY | Zip Code: 40206
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Quality & Risk Mgmt-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 15 2004
Transaction ID: R60762
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 141 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Linda McGunnigle
Mailing Address 17 Hartshorn Street
City: West Bridgewater | State: MA | Zip Code: 02379
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Reg Loss Prevent
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59795
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Linda McGunnigle
Mailing Address 17 Hartshorn Street
City: West Bridgewater | State: MA | Zip Code: 02379
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Reg Loss Prevent
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60185
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Linda McGunnigle
Mailing Address 17 Hartshorn Street
City: West Bridgewater | State: MA | Zip Code: 02379
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Adm Mgr Reg Loss Prevent
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60584
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 142 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sharon Theresa McGuyer
Mailing Address 22441 15Th Ave. So.
City: Des Moines | State: WA | Zip Code: 98198
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 25 2004
Transaction ID: R60113
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sharon Theresa McGuyer
Mailing Address 22441 15Th Ave. So.
City: Des Moines | State: WA | Zip Code: 98198
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 08 2004
Transaction ID: R60513
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Sharon Theresa McGuyer
Mailing Address 22441 15Th Ave. So.
City: Des Moines | State: WA | Zip Code: 98198
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Nursing II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 22 2004
Transaction ID: R60847
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Thomas McMullen
Mailing Address 655 Pasadena Dr
City: Magnolia | State: NJ | Zip Code: 08049
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: CFO Multi Fac-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 10 18 2004
Transaction ID: R59873
Amount of Each Receipt this Period: 12.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Thomas McMullen
Mailing Address 655 Pasadena Dr
City: Magnolia | State: NJ | Zip Code: 08049
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: CFO Multi Fac-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 11 01 2004
Transaction ID: R60264
Amount of Each Receipt this Period: 12.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Thomas McMullen
Mailing Address 655 Pasadena Dr
City: Magnolia | State: NJ | Zip Code: 08049
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: CFO Multi Fac-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 276.00

Date of Receipt: 11 15 2004
Transaction ID: R60673
Amount of Each Receipt this Period: 12.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶	36.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 144 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Robert McNew
Mailing Address 1805 Southpark Dr.
City: Arlington | State: TX | Zip Code: 76013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 21 2004
Transaction ID: R60011
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Robert McNew
Mailing Address 1805 Southpark Dr.
City: Arlington | State: TX | Zip Code: 76013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 04 2004
Transaction ID: R60409
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Robert McNew
Mailing Address 1805 Southpark Dr.
City: Arlington | State: TX | Zip Code: 76013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 18 2004
Transaction ID: R60889
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
James J McQuaid
Mailing Address 2 Hunter Point Dr.
City: Scarborough | State: ME | Zip Code: 04074
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60091
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
James J McQuaid
Mailing Address 2 Hunter Point Dr.
City: Scarborough | State: ME | Zip Code: 04074
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60480
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
James J McQuaid
Mailing Address 2 Hunter Point Dr.
City: Scarborough | State: ME | Zip Code: 04074
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60822
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Linda Mequade
Mailing Address 4712 Sw 24 Ave
City: Ft Lauderdale | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Health Information
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60001
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Linda Mequade
Mailing Address 4712 Sw 24 Ave
City: Ft Lauderdale | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Health Information
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60389
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Linda Mequade
Mailing Address 4712 Sw 24 Ave
City: Ft Lauderdale | State: FL | Zip Code: 33312
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Health Information
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60889
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 147 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dan Mcreynolds
Mailing Address 7820 Beech Spring Court
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir DataWarehouseSvcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59769
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Dan Mcreynolds
Mailing Address 7820 Beech Spring Court
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir DataWarehouseSvcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60159
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Dan Mcreynolds
Mailing Address 7820 Beech Spring Court
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir DataWarehouseSvcs
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60568
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 148 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Michael Metzger
Mailing Address 121 Tamarack Ct
City: Lindenhurst | State: IL | Zip Code: 60046
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 21 2004
Transaction ID: R59993
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael Metzger
Mailing Address 121 Tamarack Ct
City: Lindenhurst | State: IL | Zip Code: 60046
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 04 2004
Transaction ID: R60391
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Michael Metzger
Mailing Address 121 Tamarack Ct
City: Lindenhurst | State: IL | Zip Code: 60046
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 18 2004
Transaction ID: R60881
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Rose M Michels
Mailing Address 6503 Chenoweth Run Road
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Tax Compl
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59833
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Rose M Michels
Mailing Address 6503 Chenoweth Run Road
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Tax Compl
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60224
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Rose M Michels
Mailing Address 6503 Chenoweth Run Road
City: Louisville | State: KY | Zip Code: 40299
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Tax Compl
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60633
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 250
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marsha Miles
Mailing Address 2221 Admiral Circle
City: Virginia Beach | State: VA | Zip Code: 23451
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Dietary Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59904
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Marsha Miles
Mailing Address 2221 Admiral Circle
City: Virginia Beach | State: VA | Zip Code: 23451
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Dietary Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60283
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Marsha Miles
Mailing Address 2221 Admiral Circle
City: Virginia Beach | State: VA | Zip Code: 23451
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Dietary Svcs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60689
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gloria J Miller
Mailing Address 5 Hendel Dr
City: Mystic | State: CT | Zip Code: 06355
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 10 18 2004
Transaction ID: R59941
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Gloria J Miller
Mailing Address 5 Hendel Dr
City: Mystic | State: CT | Zip Code: 06355
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60333
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Gloria J Miller
Mailing Address 5 Hendel Dr
City: Mystic | State: CT | Zip Code: 06355
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60739
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Raymond W Miller
Mailing Address 139 Deewood Lane
City: Cox'S Creek | State: KY | Zip Code: 40013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Loss Prevent
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59802
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Raymond W Miller
Mailing Address 139 Deewood Lane
City: Cox'S Creek | State: KY | Zip Code: 40013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Loss Prevent
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60182
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Raymond W Miller
Mailing Address 139 Deewood Lane
City: Cox'S Creek | State: KY | Zip Code: 40013
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Loss Prevent
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60601
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 153 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John Miner
Mailing Address 4730 Dunnie Drive
City: Tampa | State: FL | Zip Code: 33614
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 10 18 2004
Transaction ID: R59874
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John Miner
Mailing Address 4730 Dunnie Drive
City: Tampa | State: FL | Zip Code: 33614
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 11 01 2004
Transaction ID: R60265
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John Miner
Mailing Address 4730 Dunnie Drive
City: Tampa | State: FL | Zip Code: 33614
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 11 15 2004
Transaction ID: R60674
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Linda Mitchell-Johnso
Mailing Address 3815 Willow Wisp Cir.
City: Haughton | State: LA | Zip Code: 71037
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 490.00

Date of Receipt: 10 21 2004
Transaction ID: R60016
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Linda Mitchell-Johnso
Mailing Address 3815 Willow Wisp Cir.
City: Haughton | State: LA | Zip Code: 71037
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 490.00

Date of Receipt: 11 04 2004
Transaction ID: R60414
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Linda Mitchell-Johnso
Mailing Address 3815 Willow Wisp Cir.
City: Haughton | State: LA | Zip Code: 71037
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 490.00

Date of Receipt: 11 18 2004
Transaction ID: R609D4
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 155 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Steven Monaghan
Mailing Address 508 W. Melrose #7-A
City: Chicago | State: IL | Zip Code: 60657
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Midwest Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59867
Amount of Each Receipt this Period: 60.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Steven Monaghan
Mailing Address 508 W. Melrose #7-A
City: Chicago | State: IL | Zip Code: 60657
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Midwest Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60258
Amount of Each Receipt this Period: 60.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Steven Monaghan
Mailing Address 508 W. Melrose #7-A
City: Chicago | State: IL | Zip Code: 60657
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-Midwest Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1380.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60667
Amount of Each Receipt this Period: 60.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **180.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 10 18 2004
Transaction ID: R59985
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 10 25 2004
Transaction ID: R60136
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 11 01 2004
Transaction ID: R60358
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 157 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 11 08 2004
Transaction ID: R60537
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 11 11 2004
Transaction ID: R60558
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
David Morrall
Mailing Address 27 Parkerville Road
City: Southboro | State: MA | Zip Code: 01772
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 11 22 2004
Transaction ID: R60871
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 158 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Susan Moss
Mailing Address 161 Westwind Road
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 10 18 2004
Transaction ID: R59809
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Susan Moss
Mailing Address 161 Westwind Road
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60189
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Susan Moss
Mailing Address 161 Westwind Road
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Crp Communications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60608
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sean R Muldoon
Mailing Address 9407 Felsmere Circle
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00

Date of Receipt: 10 18 2004
Transaction ID: R59801
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Sean R Muldoon
Mailing Address 9407 Felsmere Circle
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00

Date of Receipt: 11 01 2004
Transaction ID: R60191
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Sean R Muldoon
Mailing Address 9407 Felsmere Circle
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & Chief Med Off-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00

Date of Receipt: 11 15 2004
Transaction ID: R60600
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 180 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Paula Proeschel Murray
Mailing Address 573 Skadborg Drive
City: Eaton | State: OH | Zip Code: 45320
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59930
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Paula Proeschel Murray
Mailing Address 573 Skadborg Drive
City: Eaton | State: OH | Zip Code: 45320
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60321
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Paula Proeschel Murray
Mailing Address 573 Skadborg Drive
City: Eaton | State: OH | Zip Code: 45320
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Field Accting
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60727
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 161 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Donna M Nackers
Mailing Address 1760 Waters Ferry Drive
City: Lawrenceville | State: GA | Zip Code: 30043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59905
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Donna M Nackers
Mailing Address 1760 Waters Ferry Drive
City: Lawrenceville | State: GA | Zip Code: 30043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60284
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Donna M Nackers
Mailing Address 1760 Waters Ferry Drive
City: Lawrenceville | State: GA | Zip Code: 30043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Mgr Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60700
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 162 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Virgis Narbutas
Mailing Address 3173 Petaluma Ave
City: Long Beach | State: CA | Zip Code: 90808
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1290.00

Date of Receipt: 10 18 2004
Transaction ID: R59854
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Virgis Narbutas
Mailing Address 3173 Petaluma Ave
City: Long Beach | State: CA | Zip Code: 90808
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1290.00

Date of Receipt: 11 01 2004
Transaction ID: R60245
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Virgis Narbutas
Mailing Address 3173 Petaluma Ave
City: Long Beach | State: CA | Zip Code: 90808
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1290.00

Date of Receipt: 11 15 2004
Transaction ID: R60654
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
David R. Narramore
Mailing Address 3576 Birdsong Avenue
City: Thousand Oaks | State: CA | Zip Code: 91360
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-West Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59950
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David R. Narramore
Mailing Address 3576 Birdsong Avenue
City: Thousand Oaks | State: CA | Zip Code: 91360
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-West Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60342
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David R. Narramore
Mailing Address 3576 Birdsong Avenue
City: Thousand Oaks | State: CA | Zip Code: 91360
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-West Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60747
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James J Novak
Mailing Address 9680 Ridgewalk Court
City: Davie | State: FL | Zip Code: 33328
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 966.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59883
Amount of Each Receipt this Period: 42.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James J Novak
Mailing Address 9680 Ridgewalk Court
City: Davie | State: FL | Zip Code: 33328
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 966.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60272
Amount of Each Receipt this Period: 42.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James J Novak
Mailing Address 9680 Ridgewalk Court
City: Davie | State: FL | Zip Code: 33328
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 966.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R606B1
Amount of Each Receipt this Period: 42.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **126.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 165 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Linda M O'Bryan
Mailing Address 1001 Willow Creek Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality & Outcomes-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 18 2004
Transaction ID: R59839
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Linda M O'Bryan
Mailing Address 1001 Willow Creek Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality & Outcomes-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60230
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Linda M O'Bryan
Mailing Address 1001 Willow Creek Court
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality & Outcomes-HD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60639
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 186 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Aimee Oakes
Mailing Address 240 Paradise Lane
City: Jacksboro | State: TN | Zip Code: 37757
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 10 18 2004
Transaction ID: R59969
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Aimee Oakes
Mailing Address 240 Paradise Lane
City: Jacksboro | State: TN | Zip Code: 37757
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 01 2004
Transaction ID: R60362
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Aimee Oakes
Mailing Address 240 Paradise Lane
City: Jacksboro | State: TN | Zip Code: 37757
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 11 15 2004
Transaction ID: R60767
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59751
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60018
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60143
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60416
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60546
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Daniel A Oneil
Mailing Address 15 Westside Drive - Suite 1D8
City: N. Grosvenordale | State: CT | Zip Code: 06255
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 18 2004
Transaction ID: R60906
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Diane Ottaman
Mailing Address 40 East Cedar, Apt. 21
City: Chicago | State: IL | Zip Code: 60611
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Operating Officer
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 20 2004
Transaction ID: R59763
Amount of Each Receipt this Period: 500.00
Check

B. Full Name (Last, First, Middle Initial)
Scott W Parker
Mailing Address 2295 Wickingham Drive
City: Marietta | State: GA | Zip Code: 30066
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59943
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Scott W Parker
Mailing Address 2295 Wickingham Drive
City: Marietta | State: GA | Zip Code: 30066
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60335
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **540.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Scott W Parker
Mailing Address 2295 Wickingham Drive
City: Marietta | State: GA | Zip Code: 30066
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-South Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60741
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Steven J Poynter
Mailing Address 3105 Crestmoor Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Tech Arch
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59785
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Steven J Poynter
Mailing Address 3105 Crestmoor Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Tech Arch
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60175
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Steven J Paynter
Mailing Address 3105 Crestmoor Court
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Tech Arch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60584
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mark S Pfeifer
Mailing Address 11014 Brave Ct
City: Idianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59931
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mark S Pfeifer
Mailing Address 11014 Brave Ct
City: Idianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60322
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **35.00**

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

SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: PAGE 172 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mark S Pfeifer
Mailing Address 11014 Breve Ct
City: Idianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Financial Ana
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60726
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John Pierson
Mailing Address 7643 Dean Road
City: Indianapolis | State: IN | Zip Code: 46240
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 336.00

Date of Receipt: 10 18 2004
Transaction ID: R59985
Amount of Each Receipt this Period: 24.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Pierson
Mailing Address 7643 Dean Road
City: Indianapolis | State: IN | Zip Code: 46240
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 336.00

Date of Receipt: 11 01 2004
Transaction ID: R60378
Amount of Each Receipt this Period: 24.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **58.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Pierson
Mailing Address 7643 Dean Road
City: Indianapolis | State: IN | Zip Code: 46240
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 336.00

Date of Receipt: 11 15 2004
Transaction ID: R60785
Amount of Each Receipt this Period: 24.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John M Pinnix
Mailing Address 881 Sawyer Run Lake
City: Ponte Vedra Beach | State: FL | Zip Code: 32082
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60083
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John M Pinnix
Mailing Address 881 Sawyer Run Lake
City: Ponte Vedra Beach | State: FL | Zip Code: 32082
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R604B2
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **44.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John M Pinnix
Mailing Address 881 Sawyer Run Lake
City: Ponte Vedra Beach | State: FL | Zip Code: 32082
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Pharm Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60814
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Lewis A Ransdell
Mailing Address 2240 Halcyon Blvd
City: Montgomery | State: AL | Zip Code: 36117
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 630.00

Date of Receipt: 10 18 2004
Transaction ID: R59875
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James Ransone
Mailing Address 11644 Sw 53Th. Place
City: Cooper City | State: FL | Zip Code: 33330
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60008
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Ransone
Mailing Address 11644 Sw 53Th. Place
City: Cooper City | State: FL | Zip Code: 33330
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 04 2004
Transaction ID: R60406
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James Ransone
Mailing Address 11644 Sw 53Th. Place
City: Cooper City | State: FL | Zip Code: 33330
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 11 18 2004
Transaction ID: R60896
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Brian K Rapp
Mailing Address 154 Rock Trail Court
City: Ballwin | State: MO | Zip Code: 63011
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality Mgmt I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 18 2004
Transaction ID: R59774
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 176 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Brian K Rapp
Mailing Address 154 Rock Trail Court
City: Ballwin | State: MO | Zip Code: 63011
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality Mgmt I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60164
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Brian K Rapp
Mailing Address 154 Rock Trail Court
City: Ballwin | State: MO | Zip Code: 63011
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Quality Mgmt I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60573
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
William R Rhodes
Mailing Address 11303 Vista Greens Drive
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Tech Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59780
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
William R Rhodes
Mailing Address 11303 Vista Greens Drive
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Tech Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60180
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
William R Rhodes
Mailing Address 11303 Vista Greens Drive
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Tech Cnslt
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60589
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59758
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **25.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60057
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60150
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60456
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 / 11 / 2004
Transaction ID: R60559
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Christine H Rich
Mailing Address 54 Danforth Court
City: Haverhill | State: MA | Zip Code: 01832
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 / 18 / 2004
Transaction ID: R60945
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Deborah F Rikkert
Mailing Address 7003 Shallow Lake Road
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59780
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Deborah F Rickert
Mailing Address 7003 Shallow Lake Road
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60170
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Deborah F Rickert
Mailing Address 7003 Shallow Lake Road
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60579
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Susan P Riedl
Mailing Address 8914 Lippincott Road
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HSD Reimb
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59819
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 181 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Susan P Ried
Mailing Address 8914 Lippincott Road
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HSD Reimb
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60209
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Susan P Ried
Mailing Address 8914 Lippincott Road
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir HSD Reimb
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60618
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mary Suzanne Riedman
Mailing Address 6401 Orchid Hill Pl
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59817
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 182 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mary Suzanne Riedman
Mailing Address 6401 Orchid Hill Pl
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60207
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mary Suzanne Riedman
Mailing Address 6401 Orchid Hill Pl
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP & General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60616
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Pamela Marie Riter
Mailing Address 5224 Hampton Beach Place
City: Tampa | State: FL | Zip Code: 33609
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 10 18 2004
Transaction ID: R59876
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 183 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pamela Marie Riter
Mailing Address 5224 Hampton Beach Place
City: Tampa | State: FL | Zip Code: 33609
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 01 2004
Transaction ID: R60266
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Pamela Marie Riter
Mailing Address 5224 Hampton Beach Place
City: Tampa | State: FL | Zip Code: 33609
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 11 15 2004
Transaction ID: R60675
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 14 2004
Transaction ID: R59760
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 184 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60063
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 28 2004
Transaction ID: R60153
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60462
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 185 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 11 2004
Transaction ID: R60582
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Laurie A Roberto
Mailing Address 217 Main Street
City: Lynnfield | State: MA | Zip Code: 01940
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Administrator II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60954
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Douglas Roth
Mailing Address 9891 Heytesbery
City: Sandy | State: UT | Zip Code: 84092
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Pacific RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 440.00

Date of Receipt: 10 18 2004
Transaction ID: R59929
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Douglas Roth
Mailing Address 9891 Heytesbery
City: Sandy | State: UT | Zip Code: 84092
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Pacific RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 440.00

Date of Receipt: 11 01 2004
Transaction ID: R60320
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Douglas Roth
Mailing Address 9891 Heytesbery
City: Sandy | State: UT | Zip Code: 84092
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Pacific RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 440.00

Date of Receipt: 11 15 2004
Transaction ID: R60726
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Arthur L Rothgerber
Mailing Address 8325 Regency Woods Way
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 437.00

Date of Receipt: 10 18 2004
Transaction ID: R59836
Amount of Each Receipt this Period: 19.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **99.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Arthur L Rothgerber
Mailing Address 8325 Regency Woods Way
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 437.00

Date of Receipt: 11 01 2004
Transaction ID: R60227
Amount of Each Receipt this Period: 19.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Arthur L Rothgerber
Mailing Address 8325 Regency Woods Way
City: Louisville | State: KY | Zip Code: 40220
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Reimb
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 437.00

Date of Receipt: 11 15 2004
Transaction ID: R60636
Amount of Each Receipt this Period: 19.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mary R Russell
Mailing Address 7300 Wood Rock Rd
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Accounting-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 506.00

Date of Receipt: 10 18 2004
Transaction ID: R59849
Amount of Each Receipt this Period: 22.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 188 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mary R Russell
Mailing Address 7300 Wood Rock Rd
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Accounting-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 506.00

Date of Receipt: 11 01 2004
Transaction ID: R60240
Amount of Each Receipt this Period: 22.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mary R Russell
Mailing Address 7300 Wood Rock Rd
City: Louisville | State: KY | Zip Code: 40291
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Accounting-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 506.00

Date of Receipt: 11 15 2004
Transaction ID: R60649
Amount of Each Receipt this Period: 22.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59750
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **49.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60017
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60142
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60415
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60544
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Penelope Sargent
Mailing Address 18 Rider Road
City: Brewer | State: ME | Zip Code: 04412
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 18 2004
Transaction ID: R60905
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Christine Schramm
Mailing Address 186 Columbia Ave
City: Chillicothe | State: OH | Zip Code: 45601
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R601D1
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **20.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christine Schramm
Mailing Address 166 Columbia Ave
City: Chillicothe | State: OH | Zip Code: 45601
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60500
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Christine Schramm
Mailing Address 166 Columbia Ave
City: Chillicothe | State: OH | Zip Code: 45601
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60832
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
William B Seibert
Mailing Address 4706 Wolfcreek Pkwy
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Fin Sys Dev
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 10 18 2004
Transaction ID: R59778
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 182 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
William B Seibert
Mailing Address 4706 Wolfcreek Pkwy
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 01 2004
Transaction ID: R60168
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
William B Seibert
Mailing Address 4706 Wolfcreek Pkwy
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Fin Sys Dev
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 15 2004
Transaction ID: R60577
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Roberta Sele
Mailing Address 1581 Citation Lane
City: Neehan | State: WI | Zip Code: 54956
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 10 18 2004
Transaction ID: R59936
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 183 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Roberta Selle
Mailing Address 1581 Citation Lane
City: Neehan | State: WI | Zip Code: 54956
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 01 2004
Transaction ID: R60327
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Roberta Selle
Mailing Address 1581 Citation Lane
City: Neehan | State: WI | Zip Code: 54956
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Field Acctng-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 11 15 2004
Transaction ID: R60733
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Jack Shapiro
Mailing Address 22591 Covington Drive
City: Deer Park | State: IL | Zip Code: 60010
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 10 21 2004
Transaction ID: R59989
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 184 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jack Shapiro
Mailing Address 22591 Covington Drive
City: Deer Park | State: IL | Zip Code: 60010
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 11 04 2004
Transaction ID: R60397
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Jack Shapiro
Mailing Address 22591 Covington Drive
City: Deer Park | State: IL | Zip Code: 60010
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 720.00

Date of Receipt: 11 18 2004
Transaction ID: R60887
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Michael W Sharp
Mailing Address 14026 Rochester
City: Boise | State: ID | Zip Code: 83713
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59923
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **80.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 185 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Michael W Sharp
Mailing Address 14026 Rochester
City: Boise | State: ID | Zip Code: 83713
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60314
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Michael W Sharp
Mailing Address 14026 Rochester
City: Boise | State: ID | Zip Code: 83713
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60720
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Traci Shelton
Mailing Address 4138 Quiet Meadow Ct
City: Fairbanks | State: CA | Zip Code: 99628
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-West Reg-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1525.00

Date of Receipt: 10 18 2004
Transaction ID: R59866
Amount of Each Receipt this Period: 65.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **105.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 186 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Traci Shelton
Mailing Address 413B Quiet Meadow Ct
City: Fairbanks | State: CA | Zip Code: 95628
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-West Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1525.00
Date of Receipt: 11 01 2004
Transaction ID: R60257
Amount of Each Receipt this Period: 80.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Traci Shelton
Mailing Address 413B Quiet Meadow Ct
City: Fairbanks | State: CA | Zip Code: 95628
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-West Reg-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1525.00
Date of Receipt: 11 15 2004
Transaction ID: R60666
Amount of Each Receipt this Period: 80.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Larry W Shrader
Mailing Address 425 Deer View Way
City: Bolivar | State: TN | Zip Code: 38008
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 21 2004
Transaction ID: R60039
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **170.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 187 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Larry W Shrader
Mailing Address 425 Deer View Way
City: Bolivar | State: TN | Zip Code: 38008
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60436
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Larry W Shrader
Mailing Address 425 Deer View Way
City: Bolivar | State: TN | Zip Code: 38008
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60927
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Timothy L Simpson
Mailing Address 498 Branscomb Road
City: Gm Cve Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 25 2004
Transaction ID: R60082
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Timothy L Simpson
Mailing Address 498 Branscomb Road
City: Gm Cve Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 08 2004
Transaction ID: R60481
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Timothy L Simpson
Mailing Address 498 Branscomb Road
City: Gm Cve Spgs | State: FL | Zip Code: 32043
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 22 2004
Transaction ID: R60813
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kathy Skaggs
Mailing Address 1714 Sterling Valley Dr
City: Owensboro | State: KY | Zip Code: 42303
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00

Date of Receipt: 10 25 2004
Transaction ID: R60065
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 189 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Kathy Skaggs
Mailing Address 1714 Sterling Valley Dr
City: Owensboro | State: KY | Zip Code: 42303
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00

Date of Receipt: 11 08 2004
Transaction ID: R60463
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kathy Skaggs
Mailing Address 1714 Sterling Valley Dr
City: Owensboro | State: KY | Zip Code: 42303
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00

Date of Receipt: 11 22 2004
Transaction ID: R60796
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 14 2004
Transaction ID: R59755
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **25.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 21 2004
Transaction ID: R60026
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 28 2004
Transaction ID: R60147
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 04 2004
Transaction ID: R60424
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 201 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60553
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Thomas M Skirven
Mailing Address Hc 67 Box 1301
City: Enfield | State: ME | Zip Code: 04493
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 18 2004
Transaction ID: R60914
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Cynthia Smith
Mailing Address 9N868 Bowes Bend Dr
City: Elgin | State: IL | Zip Code: 60123
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59868
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **20.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 202 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cynthia Smith
Mailing Address 9N668 Bowes Bend Dr
City: Elgin | State: IL | Zip Code: 60123
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60259
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Cynthia Smith
Mailing Address 9N668 Bowes Bend Dr
City: Elgin | State: IL | Zip Code: 60123
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60668
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kelly G Snowball
Mailing Address 4468 Forest Green Drive
City: Ogden | State: UT | Zip Code: 84403
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59924
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 203 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kelly G Snowball
Mailing Address 4468 Forest Green Drive
City: Ogden | State: UT | Zip Code: 84403
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60315
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kelly G Snowball
Mailing Address 4468 Forest Green Drive
City: Ogden | State: UT | Zip Code: 84403
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60721
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Marion R Sodergren
Mailing Address 1009 W. Park Palisades Dr.
City: South Jordon | State: UT | Zip Code: 84095
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-Pac Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 440.00
Date of Receipt: 10 18 2004
Transaction ID: R59920
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 80.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 204 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marion R Sodergren
Mailing Address 1009 W. Park Palisades Dr.
City: South Jordon | State: UT | Zip Code: 84095
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-Pac Reg-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 440.00

Date of Receipt: 11 01 2004
Transaction ID: R60311
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Marion R Sodergren
Mailing Address 1009 W. Park Palisades Dr.
City: South Jordon | State: UT | Zip Code: 84095
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Clin Ops-Pac Reg-HSD
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 440.00

Date of Receipt: 11 15 2004
Transaction ID: R60717
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Rachelle Spiro
Mailing Address 2304 Phoenix Hill Drive
City: Louisville | State: KY | Zip Code: 40207-1227
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Director of Pharmacy Administration
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 15 2004
Transaction ID: R59761
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ▶ **330.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 205 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Richard H Starke
Mailing Address 2404 Dundee Rd
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Rehab Svcs-PRS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59975
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Richard H Starke
Mailing Address 2404 Dundee Rd
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Rehab Svcs-PRS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60368
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Richard H Starke
Mailing Address 2404 Dundee Rd
City: Louisville | State: KY | Zip Code: 40205
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP Rehab Svcs-PRS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60774
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 206 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Robert Stein
Mailing Address 14 Hermit Thrush Place
City: The Woodlands | State: TX | Zip Code: 77382
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59879
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Robert Stein
Mailing Address 14 Hermit Thrush Place
City: The Woodlands | State: TX | Zip Code: 77382
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60269
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Robert Stein
Mailing Address 14 Hermit Thrush Place
City: The Woodlands | State: TX | Zip Code: 77382
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60678
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 207 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
John R Stephenson II
Mailing Address 1111 Cliffwood Drive
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Proj Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 315.00

Date of Receipt: 10 18 2004
Transaction ID: R59845
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
John R Stephenson II
Mailing Address 1111 Cliffwood Drive
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Proj Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 315.00

Date of Receipt: 11 01 2004
Transaction ID: R60236
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
John R Stephenson II
Mailing Address 1111 Cliffwood Drive
City: Goshen | State: KY | Zip Code: 40026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Proj Mgr
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 315.00

Date of Receipt: 11 15 2004
Transaction ID: R60645
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 208 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Stephen F. Stoess
Mailing Address 705 Sentry Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Telecommunications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 491.40

Date of Receipt: 10 18 2004
Transaction ID: R59946
Amount of Each Receipt this Period: 23.40
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Stephen F. Stoess
Mailing Address 705 Sentry Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Telecommunications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 491.40

Date of Receipt: 11 01 2004
Transaction ID: R60336
Amount of Each Receipt this Period: 23.40
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Stephen F. Stoess
Mailing Address 705 Sentry Way
City: Louisville | State: KY | Zip Code: 40223
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Telecommunications
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 491.40

Date of Receipt: 11 15 2004
Transaction ID: R60743
Amount of Each Receipt this Period: 23.40
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **70.20**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 209 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
David Stordy
Mailing Address 4195 Old Oak Trace
City: Cummings | State: GA | Zip Code: 30041
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 10 18 2004
Transaction ID: R59896
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
David Stordy
Mailing Address 4195 Old Oak Trace
City: Cummings | State: GA | Zip Code: 30041
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 11 01 2004
Transaction ID: R60285
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
David Stordy
Mailing Address 4195 Old Oak Trace
City: Cummings | State: GA | Zip Code: 30041
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr VP-South Reg-HSD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 11 15 2004
Transaction ID: R60682
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 210 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Angela Beth Sutton
Mailing Address 17480 Farmington Square Rd.
City: Granger | State: IN | Zip Code: 46530
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 10 21 2004
Transaction ID: R60090
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Angela Beth Sutton
Mailing Address 17480 Farmington Square Rd.
City: Granger | State: IN | Zip Code: 46530
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 11 04 2004
Transaction ID: R60429
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Meredith M Taylor
Mailing Address 4330 Random Oaks Ln
City: Loomis | State: CA | Zip Code: 95650
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 10 25 2004
Transaction ID: R60070
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 211 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Meredith M Taylor
Mailing Address 4330 Random Oaks Ln
City: Loomis | State: CA | Zip Code: 95650
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 08 2004
Transaction ID: R60469
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Meredith M Taylor
Mailing Address 4330 Random Oaks Ln
City: Loomis | State: CA | Zip Code: 95650
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 22 2004
Transaction ID: R60801
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James D Thigpen
Mailing Address 355 Woolsey Brooks
City: Fayetteville | State: GA | Zip Code: 30214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 25 2004
Transaction ID: R60084
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 212 / 250
(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James D Thigpen
Mailing Address 355 Woolsey Brooks
City: Fayetteville | State: GA | Zip Code: 30214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 08 2004
Transaction ID: R60483
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
James D Thigpen
Mailing Address 355 Woolsey Brooks
City: Fayetteville | State: GA | Zip Code: 30214
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Plant Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 22 2004
Transaction ID: R60815
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Debi Thompson
Mailing Address 27115 46Th Ave. S.
City: Kent | State: WA | Zip Code: 98032
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60112
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Debi Thompson
Mailing Address 27115 46Th Ave. S.
City: Kent | State: WA | Zip Code: 98032
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60512
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Debi Thompson
Mailing Address 27115 46Th Ave. S.
City: Kent | State: WA | Zip Code: 98032
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60846
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Marylou W Thompson
Mailing Address 18 Burgundy Drive
City: Hampton | State: NH | Zip Code: 03842
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 18 2004
Transaction ID: R59805
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marylou W Thompson
Mailing Address 18 Burgundy Drive
City: Hampton | State: NH | Zip Code: 03842
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60195
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Marylou W Thompson
Mailing Address 18 Burgundy Drive
City: Hampton | State: NH | Zip Code: 03842
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations I
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60604
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Patrick Tieman
Mailing Address PO Box 269
City: McAfee | State: NJ | Zip Code: 07428
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59877
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **55.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 215 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Patrick Tieman
Mailing Address PO Box 269
City: McAfee | State: NJ | Zip Code: 07428
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60267
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Patrick Tieman
Mailing Address PO Box 269
City: McAfee | State: NJ | Zip Code: 07428
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Bus Implement-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60676
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Anita Tillery
Mailing Address 13157 Watson Seed Farm Rd
City: Whitakers | State: NC | Zip Code: 27891
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 10 25 2004
Transaction ID: R60088
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Anita Tillery
Mailing Address 13157 Watson Seed Farm Rd
City: Whitakers | State: NC | Zip Code: 27891
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 08 2004
Transaction ID: R60497
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Anita Tillery
Mailing Address 13157 Watson Seed Farm Rd
City: Whitakers | State: NC | Zip Code: 27891
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 11 22 2004
Transaction ID: R60829
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Berard E. Tomaseatti
Mailing Address 7510 Cantrell Drive
City: Crestwood | State: KY | Zip Code: 40014
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 475.00

Date of Receipt: 10 18 2004
Transaction ID: R59957
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bernard E. Tomassetti
Mailing Address 751D Cantrell Drive
City: Crestwood | State: KY | Zip Code: 40014
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 475.00

Date of Receipt: 11 01 2004
Transaction ID: R60349
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Bernard E. Tomassetti
Mailing Address 751D Cantrell Drive
City: Crestwood | State: KY | Zip Code: 40014
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 475.00

Date of Receipt: 11 15 2004
Transaction ID: R60755
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Andrew W Teepetsaris
Mailing Address 3 Moore Circle
City: Danvers | State: MA | Zip Code: 01923
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-NE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59786
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 218 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Andrew W Tsapatsaris
Mailing Address 3 Moore Circle
City: Danvers | State: MA | Zip Code: 01923
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-NE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 01 2004
Transaction ID: R60186
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Andrew W Tsapatsaris
Mailing Address 3 Moore Circle
City: Danvers | State: MA | Zip Code: 01923
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Pharm-NE Reg-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 11 15 2004
Transaction ID: R60585
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
James Tucker
Mailing Address P O Box 223
City: Carthage | State: TN | Zip Code: 37030
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 10 21 2004
Transaction ID: R60043
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 219 / 250
(check only one)

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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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
James Tucker
Mailing Address P O Box 223
City: Carthage | State: TN | Zip Code: 37030
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60442
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
James Tucker
Mailing Address P O Box 223
City: Carthage | State: TN | Zip Code: 37030
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60931
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Paul D Tunnell
Mailing Address 378 Liberty Street
City: San Francisco | State: CA | Zip Code: 94114
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1150.00

Date of Receipt: 10 18 2004
Transaction ID: R59919
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 220 / 250
(check only one)
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Paul D Tunnell
Mailing Address 378 Liberty Street
City: San Francisco | State: CA | Zip Code: 94114
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 01 2004
Transaction ID: R60310
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Paul D Tunnell
Mailing Address 378 Liberty Street
City: San Francisco | State: CA | Zip Code: 94114
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1150.00
Date of Receipt: 11 15 2004
Transaction ID: R60716
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Jan Turk
Mailing Address 1314 Amelia St
City: New Orleans | State: LA | Zip Code: 70115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 485.00
Date of Receipt: 10 21 2004
Transaction ID: R59986
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 221 / 250
(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jan Turk
Mailing Address 1314 Amelia St
City: New Orleans | State: LA | Zip Code: 70115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 485.00

Date of Receipt: 11 04 2004
Transaction ID: R60394
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Jan Turk
Mailing Address 1314 Amelia St
City: New Orleans | State: LA | Zip Code: 70115
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 485.00

Date of Receipt: 11 18 2004
Transaction ID: R60884
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
T. Stephen Turner
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPStrategicPlan&BusDevHD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 920.00

Date of Receipt: 10 18 2004
Transaction ID: R59863
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **80.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 222 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
T. Stephen Turner
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPStrategicPlan&BusDevHD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 820.00
Date of Receipt: 11 01 2004
Transaction ID: R60254
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
T. Stephen Turner
Mailing Address 680 South Fourth Ave
City: Louisville | State: KY | Zip Code: 40202
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: SVPStrategicPlan&BusDevHD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 820.00
Date of Receipt: 11 15 2004
Transaction ID: R60663
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Elizabeth Voigt
Mailing Address 7090 Rockrose Terrace
City: Carlsbad | State: CA | Zip Code: 92009
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Dir Rehab
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 10 25 2004
Transaction ID: R60139
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **95.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 223 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Elizabeth Voigt
Mailing Address 7090 Rockrose Terrace
City: Carlsbad | State: CA | Zip Code: 92009
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Dir Rehab
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 08 2004
Transaction ID: R60536
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Elizabeth Voigt
Mailing Address 7090 Rockrose Terrace
City: Carlsbad | State: CA | Zip Code: 92009
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Area Dir Rehab
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 225.00

Date of Receipt: 11 22 2004
Transaction ID: R60872
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
David L. Vollmer
Mailing Address 1305 Ambridge Drive
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Acctng
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59951
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 224 / 250
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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
David L. Vollmer
Mailing Address 1305 Ambridge Drive
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Accting
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60343
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
David L. Vollmer
Mailing Address 1305 Ambridge Drive
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dir Accting
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R60748
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Joseph Wainscott
Mailing Address 8918 Serpent Circle
City: Indianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Central RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59858
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 35.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 225 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph Wainscott
Mailing Address 891B Serpent Circle
City: Indianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Central RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60249
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Joseph Wainscott
Mailing Address 891B Serpent Circle
City: Indianapolis | State: IN | Zip Code: 46236
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Central RegHSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60658
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Waldrop
Mailing Address 128 West Hwy 25/70
City: Dandridge | State: TN | Zip Code: 37725
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 270.00

Date of Receipt: 10 21 2004
Transaction ID: R60051
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 226 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Waldrop
Mailing Address 128 West Hwy 25/70
City: Dandridge | State: TN | Zip Code: 37725
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 270.00

Date of Receipt: 11 04 2004
Transaction ID: R60450
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
John Waldrop
Mailing Address 128 West Hwy 25/70
City: Dandridge | State: TN | Zip Code: 37725
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir III
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 270.00

Date of Receipt: 11 18 2004
Transaction ID: R60939
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Christine M Walker
Mailing Address 2891 Diamond Rd
City: Camp Verde | State: AZ | Zip Code: 86322
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 21 2004
Transaction ID: R60027
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 227 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christine M Walker
Mailing Address 2891 Diamond Rd
City: Camp Verde | State: AZ | Zip Code: 86322
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 04 2004
Transaction ID: R60425
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Christine M Walker
Mailing Address 2891 Diamond Rd
City: Camp Verde | State: AZ | Zip Code: 86322
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 18 2004
Transaction ID: R60915
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
J. Herold Walker
Mailing Address 429 Freedom Trail
City: Sparta | State: TN | Zip Code: 38583
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59862
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **35.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
J. Harold Walker
Mailing Address 429 Freedom Trail
City: Sparta | State: TN | Zip Code: 38583
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60253
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
J. Harold Walker
Mailing Address 429 Freedom Trail
City: Sparta | State: TN | Zip Code: 38583
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Operations II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60662
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Charles Wendig
Mailing Address 2804 Chestnut Ridge Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Ops & Telecomm
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 10 18 2004
Transaction ID: R597B1
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Charles Wardrip
Mailing Address 2804 Chestnut Ridge Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Ops & Telecomm
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 01 2004
Transaction ID: R60171
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Charles Wardrip
Mailing Address 2804 Chestnut Ridge Place
City: Louisville | State: KY | Zip Code: 40245
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP IS Ops & Telecomm
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 690.00

Date of Receipt: 11 15 2004
Transaction ID: R60580
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Stephanie J Warren
Mailing Address 2169 Balmer-Fenwick Road
City: Floyds Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Facility Mgmt
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59830
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 230 / 250
(check only one)
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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stephanie J Warren
Mailing Address 2169 Balmer-Fenwick Road
City: Floyds Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Facility Mgmt
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60221
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Stephanie J Warren
Mailing Address 2169 Balmer-Fenwick Road
City: Floyds Knobs | State: IN | Zip Code: 47119
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir Facility Mgmt
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60630
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Judy Weaver
Mailing Address 1835 Blackmore Drive
City: Indianapolis | State: IN | Zip Code: 46231
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59767
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 231 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Judy Weaver
Mailing Address 1635 Blackmore Drive
City: Indianapolis | State: IN | Zip Code: 46231
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60157
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Judy Weaver
Mailing Address 1635 Blackmore Drive
City: Indianapolis | State: IN | Zip Code: 46231
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Reg Dir Clin Ops-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60566
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Joseph F Wagiarz
Mailing Address 35 Farrington Ave
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-NE Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59906
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph F Weglarz
Mailing Address 35 Farrington Ave
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-NE Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60295
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Joseph F Weglarz
Mailing Address 35 Farrington Ave
City: Gloucester | State: MA | Zip Code: 01930
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-NE Reg-HSD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60701
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Robert G Weir
Mailing Address 4100 Napanee Rd
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operations-KPS
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59815
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 233 / 250
(check only one)

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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert G Weir
Mailing Address 4100 Napanee Rd
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operations-KPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60205
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Robert G Weir
Mailing Address 4100 Napanee Rd
City: Louisville | State: KY | Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Operations-KPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60614
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Theodore Welding
Mailing Address 2448 Middle River Dr.
City: Ft. Lauderdale | State: FL | Zip Code: 33305
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 10 21 2004
Transaction ID: R60003
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 234 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Theodore Welding
Mailing Address 244B Middle River Dr.
City: Ft. Lauderdale | State: FL | Zip Code: 33305
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 04 2004
Transaction ID: R60401
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Theodore Welding
Mailing Address 244B Middle River Dr.
City: Ft. Lauderdale | State: FL | Zip Code: 33305
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 18 2004
Transaction ID: R60891
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 18 2004
Transaction ID: R59901
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 235 / 250
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 25 2004
Transaction ID: R60095
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 01 2004
Transaction ID: R60280
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 08 2004
Transaction ID: R60484
Amount of Each Receipt this Period: 5.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **15.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 11 2004
Transaction ID: R60551
Amount of Each Receipt this Period: 5.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Scott West
Mailing Address 13 Edward Street
City: Milton | State: VT | Zip Code: 05468
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Executive Dir II
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 11 22 2004
Transaction ID: R60826
Amount of Each Receipt this Period: 5.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Anthony Whitehead
Mailing Address 7410 Steeplecrest Circle, #107
City: Louisville | State: KY | Zip Code: 40222
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Finance-Hospital Div.
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 29 2004
Transaction ID: R60141
Amount of Each Receipt this Period: 1000.00
Check

SUBTOTAL of Receipts This Page (optional) ▶ **1010.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Alexandra Wilcox
Mailing Address 3521 E. Nugget Canyon Pl.
City: Tucson | State: AZ | Zip Code: 85718
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 10 25 2004
Transaction ID: R60131
Amount of Each Receipt this Period: 25.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Alexandra Wilcox
Mailing Address 3521 E. Nugget Canyon Pl.
City: Tucson | State: AZ | Zip Code: 85718
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 08 2004
Transaction ID: R60531
Amount of Each Receipt this Period: 25.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Alexandra Wilcox
Mailing Address 3521 E. Nugget Canyon Pl.
City: Tucson | State: AZ | Zip Code: 85718
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Exec Off I-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 22 2004
Transaction ID: R60865
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Billy Wilcox
Mailing Address 321B Morning Dove
City: Midlothian | State: TX | Zip Code: 76065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 10 25 2004
Transaction ID: R60074
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Billy Wilcox
Mailing Address 321B Morning Dove
City: Midlothian | State: TX | Zip Code: 76065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 08 2004
Transaction ID: R60473
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Billy Wilcox
Mailing Address 321B Morning Dove
City: Midlothian | State: TX | Zip Code: 76065
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off II-Hosp
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00

Date of Receipt: 11 22 2004
Transaction ID: R60805
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Monica Wills
Mailing Address 713 NW 108th Terrace
City: Pembroke Pines | State: FL | Zip Code: 33026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 / 18 / 2004
Transaction ID: R59974
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Monica Wills
Mailing Address 713 NW 108th Terrace
City: Pembroke Pines | State: FL | Zip Code: 33026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 01 / 2004
Transaction ID: R60367
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Monica Wills
Mailing Address 713 NW 108th Terrace
City: Pembroke Pines | State: FL | Zip Code: 33026
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Clinical Off III-HD
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 / 15 / 2004
Transaction ID: R60773
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Nancy Wilson
Mailing Address 38 La Sierra Drive
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 10 25 2004
Transaction ID: R60072
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Nancy Wilson
Mailing Address 38 La Sierra Drive
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 08 2004
Transaction ID: R60471
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Nancy Wilson
Mailing Address 38 La Sierra Drive
City: Phillips Ranch | State: CA | Zip Code: 91766
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Chief Fin Off III-Hosp
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 11 22 2004
Transaction ID: R60803
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 241 / 250
(check only one)

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. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
David R Windhorst
Mailing Address 8603 Birch Court
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Financial Sys Dev
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 880.00

Date of Receipt: 10 18 2004
Transaction ID: R59764
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
David R Windhorst
Mailing Address 8603 Birch Court
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Financial Sys Dev
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 880.00

Date of Receipt: 11 01 2004
Transaction ID: R60154
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
David R Windhorst
Mailing Address 8603 Birch Court
City: Louisville | State: KY | Zip Code: 40242
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Financial Sys Dev
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 880.00

Date of Receipt: 11 15 2004
Transaction ID: R60563
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 242 / 250
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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. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lawrence I Wolf
Mailing Address 4826 N Winthrop Ave #3S
City: Chicago | State: IL | Zip Code: 60640
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Appl-Data Arch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 10 18 2004
Transaction ID: R59765
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Lawrence I Wolf
Mailing Address 4826 N Winthrop Ave #3S
City: Chicago | State: IL | Zip Code: 60640
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Appl-Data Arch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 01 2004
Transaction ID: R60155
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Lawrence I Wolf
Mailing Address 4826 N Winthrop Ave #3S
City: Chicago | State: IL | Zip Code: 60640
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Cnslt Appl-Data Arch
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 460.00

Date of Receipt: 11 15 2004
Transaction ID: R60564
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 243 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Anne S Woods
Mailing Address 7420 Falls Ridge Ct.
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Internal Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 524.00

Date of Receipt: 10 18 2004
Transaction ID: R59828
Amount of Each Receipt this Period: 28.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Anne S Woods
Mailing Address 7420 Falls Ridge Ct.
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Internal Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 524.00

Date of Receipt: 11 01 2004
Transaction ID: R60219
Amount of Each Receipt this Period: 28.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Anne S Woods
Mailing Address 7420 Falls Ridge Ct.
City: Louisville | State: KY | Zip Code: 40241
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: VP Internal Audit
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 524.00

Date of Receipt: 11 15 2004
Transaction ID: R60628
Amount of Each Receipt this Period: 28.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **84.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 244 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janet L Worcester
Mailing Address 24 Saratoga Avenue
City: Bangor | State: ME | Zip Code: 04401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 10 18 2004
Transaction ID: R59913
Amount of Each Receipt this Period: 10.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Janet L Worcester
Mailing Address 24 Saratoga Avenue
City: Bangor | State: ME | Zip Code: 04401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 01 2004
Transaction ID: R60302
Amount of Each Receipt this Period: 10.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Janet L Worcester
Mailing Address 24 Saratoga Avenue
City: Bangor | State: ME | Zip Code: 04401
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 230.00

Date of Receipt: 11 15 2004
Transaction ID: R607D8
Amount of Each Receipt this Period: 10.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 245 / 250
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mary J Yesue
Mailing Address P. O. Box 921
City: York Harbor | State: ME | Zip Code: 03911
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 18 2004
Transaction ID: R59893
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mary J Yesue
Mailing Address P. O. Box 921
City: York Harbor | State: ME | Zip Code: 03911
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 01 2004
Transaction ID: R60282
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mary J Yesue
Mailing Address P. O. Box 921
City: York Harbor | State: ME | Zip Code: 03911
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Dist Dir Clin Ops
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 11 15 2004
Transaction ID: R60680
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 246 / 250
(check only one)

X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Catherine C Young
Mailing Address 6303 Deep Creek Drive
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Litigat Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 10 18 2004
Transaction ID: R59846
Amount of Each Receipt this Period: 15.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Catherine C Young
Mailing Address 6303 Deep Creek Drive
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Litigat Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 01 2004
Transaction ID: R60237
Amount of Each Receipt this Period: 15.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Catherine C Young
Mailing Address 6303 Deep Creek Drive
City: Prospect | State: KY | Zip Code: 40059
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred Healthcare, Inc.
Occupation: Sr Dir & Litigat Counsel
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 345.00

Date of Receipt: 11 15 2004
Transaction ID: R60646
Amount of Each Receipt this Period: 15.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶	**45.00**
TOTAL This Period (last page this line number only) ▶	**16954.70**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☒ 22	☐ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b	

NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kindred Healthcare KY PAC

Mailing Address 680 South Fourth Avenue

City: Louisville | State: KY | Zip Code: 40202

Purpose of Disbursement: Contribution Affiliated PAC

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D744

Date of Disbursement: 11 / 08 / 2004

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
American Health Care Assoc PAC

Mailing Address 1201 L Street NW

City: Washington | State: DC | Zip Code: 20005-4014

Purpose of Disbursement: Contr. American Healthcare Assoc (-O)

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D742
Date of Disbursement: 10 / 19 / 2004

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Martinez for Senate

Mailing Address PO Box 536176

City: Orlando | State: FL | Zip Code: 32853-6176

Purpose of Disbursement: Contr.

Candidate Name: Mel Martinez

Category/ Type

Office Sought: House / X Senate / President — State: FL District

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: D743
Date of Disbursement: 10 / 25 / 2004

Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
Mike Bilirakis for Congress

Mailing Address P O Box 1077

City: Tarpon Springs | State: FL | Zip Code: 34688

Purpose of Disbursement: Contr.

Candidate Name: Michael Bilirakis

Category/ Type

Office Sought: X House / Senate / President — State: FL District 09

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: D739
Date of Disbursement: 10 / 19 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9000.00**

TOTAL This Period (last page this line number only) ▶ **9000.00**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b	

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Committee to Elect Bill Harris

Mailing Address 1328 Township Road

City: Ashland | State: OH | Zip Code: 44805

Purpose of Disbursement: Non-Federal Bill Harris (OH-18-R)

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D746
Date of Disbursement: 11 / 12 / 2004

Amount of Each Disbursement this Period: 1250.00

B.
Full Name (Last, First, Middle Initial)
Committee to Elect John Laird

Mailing Address PO Box 863

City: Santa Cruz | State: CA | Zip Code: 05061

Purpose of Disbursement: Non-Federal John Laird (CA-27-D)

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D738
Date of Disbursement: 10 / 15 / 2004

Amount of Each Disbursement this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Crawford Committee

Mailing Address 3731 N Station Apt B9

City: Indianpolis | State: IN | Zip Code: 46218

Purpose of Disbursement: Non-Federal William A. Crawford

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D741
Date of Disbursement: 10 / 19 / 2004

Amount of Each Disbursement this Period: 1000.00

(IN-9B-D)

SUBTOTAL of Disbursements This Page (optional) ▶ **2750.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b	

NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frommer for Assembly

Mailing Address 2658 Griffith Park Blvd. PMB 102

City: Los Angeles | State: CA | Zip Code:

Purpose of Disbursement
Non-Federal Dario J. Frommer (CA-43-D)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President — State: District

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D745
Date of Disbursement: 11 / 11 / 2004

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Pat Bauer for State Representative

Mailing Address 1307 Sunnymede

City: South Bend | State: IN | Zip Code: 46218

Purpose of Disbursement
Non-Federal Patrick Bauer (IN-6-D)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President — State: District

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Transaction ID: D740
Date of Disbursement: 10 / 19 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	**2000.00**
TOTAL This Period (last page this line number only) ▶	**4750.00**