

**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)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Judith C Dexter</b>		Date of Receipt M / D / Y 11 / 04 / 2004
Mailing Address 4161 Ridge Road		Transaction ID: R60428
City Kingsport	State TN	Zip Code 37660
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer Kindred Healthcare, Inc.	Occupation Executive Dir II	Payroll Deduction
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. Judith C Dexter</b>		Date of Receipt M / D / Y 11 / 18 / 2004
Mailing Address 4161 Ridge Road		Transaction ID: R60918
City Kingsport	State TN	Zip Code 37660
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer Kindred Healthcare, Inc.	Occupation Executive Dir II	Payroll Deduction
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C. Paul J Diaz</b>		Date of Receipt M / D / Y 11 / 04 / 2004
Mailing Address 10411 Aubinoe Farm Drive		Transaction ID: R60389
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Kindred Healthcare, Inc.	Occupation President	Check
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>2540.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	