

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

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

FOR LINE NUMBER: PAGE 15 / 20

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)
CONGRESSIONAL MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 01 / 27 / 2004	
Mailing Address 880 South Fourth Street ONE VENCOR PLAGE		Transaction ID: SA11C.6324	
City State Zip Code Louisville KY 40202	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00242271		CONTRIBUTION	
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		
Full Name (Last, First, Middle Initial) B. SIERRA HEALTH SERVICES POLITICAL ACTION COMMITTEE (SHSPAC)		Date of Receipt M / D / Y 01 / 02 / 2004	
Mailing Address PO BOX 15645		Transaction ID: SA11C.6338	
City State Zip Code LAS VEGAS NV 89114	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00295380		CONTRIBUTION	
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	28206.28