

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Kindred Healthcare, Inc. PAC

A. Jasnoff, Jeffrey, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9012 Coltsfoot Trace
 City Prospect State KY Zip Code 40059-7672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kindred Healthcare, Inc. Occupation (for Individual) SVP Human Resources Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1961243354231
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Stodghill, Jeffrey, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3713 Cypress Springs Place
 City Louisville State KY Zip Code 40245-7402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kindred Healthcare, Inc. Occupation (for Individual) VP & Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1961243454231
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Flowers, James, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4024 St. Germaine Court
 City Louisville State KY Zip Code 40207-3810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kindred Healthcare, Inc. Occupation (for Individual) SVP Corp Fin & Treasury
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **04 / 30 / 2017**
Transaction ID : PR1975144154231
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	