

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

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

FOR LINE NUMBER: PAGE 10 OF 45
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Mary Claire Willman

Mailing Address 529 Oaks Court

City State Zip Code
Webster Groves MO 63119-3530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kindred Healthcare, Inc. Region Vice President HRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2012
Transaction ID : 45819546

Amount of Each Receipt this Period
270.00

Full Name (Last, First, Middle Initial)
B. Dennis Ertel

Mailing Address 6912 Windham Parkway

City State Zip Code
Prospect KY 40059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kindred Healthcare, Inc VP Clinical/Bus Sys Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2012
Transaction ID : 45940093

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Jonathan Blum

Mailing Address 702 Shady Lane

City State Zip Code
Louisville KY 40223-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kindred Healthcare Inc. Board of Directors

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2012
Transaction ID : 46010413

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7770.00

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