

**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 11 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) William M Altman		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 9103 Lexington Lane		Transaction ID: PR1094198021842
	City Louisville	State KY	Zip Code 40241
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.60
	Name of Employer Kindred Healthcare Inc.	Occupation SVPStrategy&PublicPolicy	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80		

B.	Full Name (Last, First, Middle Initial) Michael Comer		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 12 Lewis		Transaction ID: PR1094200421842
	City Irvine	State CA	Zip Code 92620
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
	Name of Employer Kindred Healthcare Inc.	Occupation VP & CFO-West Reg-HD	P/R Deduction (\$35.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

C.	Full Name (Last, First, Middle Initial) Traci Shelton		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 2913 3rd. Street # 201		Transaction ID: PR1094200621842
	City Santa Monica	State CA	Zip Code 90405
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 380.00
	Name of Employer Kindred Healthcare Inc.	Occupation Exec VP-West Reg-HD	P/R Deduction (\$190.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00		

SUBTOTAL of Receipts This Page (optional)	834.60
TOTAL This Period (last page this line number only)	