

**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 6 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Isaac Kaufman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8204 Township Drive  
 City Owings Mills State MD Zip Code 21117-5416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Inc. Occupation Board of Directors  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2012  
**Transaction ID : 45606696**  
 Amount of Each Receipt this Period  
 5000.00

**B. Steven Monaghan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 508 W. Melrose #7-A  
 City Chicago State IL Zip Code 60657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Inc. Occupation Exec VP-Cent Reg-HD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2012  
**Transaction ID : 45606697**  
 Amount of Each Receipt this Period  
 1490.00

**C. Susan Kay Krall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6801 Atlanta Drive  
 City Colleyville State TX Zip Code 76034-5681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RehabCare Occupation Regional VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2012  
**Transaction ID : 45606698**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8990.00
<b>TOTAL</b> This Period (last page this line number only).....▶	