

**Kindred Healthcare Inc., PAC**

Name (print) **680 South Fourth Ave., Louisville, KY 40202**

Office (if applicable)

District (if applicable)

**502-596-7300**

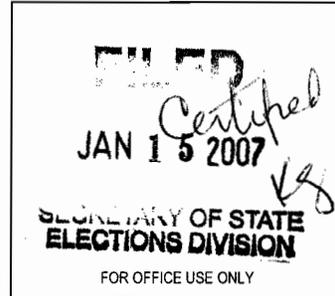
Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es)  CANDIDATE  PAC  BAG  POL PRTY  IND EXP  NONPROFIT CORP  
 AMENDED  ANNUAL FILING  PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- Annual Filing - Due January 15, 2006  
Period: January 1, 2005 – December 31, 2005
- Report #1 — Due August 8, 2006\*  
Period: Jan. 1, 2006 — Aug 3, 2006
- Report #2 Due — October 31, 2006\*  
Period: Aug. 4, 2006 — Oct. 26, 2006
- Report #3 Due — January 15, 2007\*\*  
Period: Oct. 27, 2006 — Dec. 31, 2006
- Annual Filing – Due January 15, 2007  
Period: January 1, 2006 – December 31, 2006



15386

\* These Reports are filed by incumbents/candidates running for office in the 2006 election cycle  
 \*\* Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

**CONTRIBUTIONS SUMMARY**

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)	\$0.00	\$0.00
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	\$0.00	\$0.00
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	\$0.00	\$0.00
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	\$0.00	\$0.00
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	\$0.00	\$0.00
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)	\$0.00	\$0.00
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	\$0.00	\$0.00

**EXPENSES SUMMARY**

8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	\$0.00	\$0.00
9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)	\$0.00	\$0.00
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)	\$0.00	\$0.00
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	\$0.00	\$0.00
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15 <sup>th</sup> day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet)	\$0.00	

**AFFIRMATION**

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

*Hank Robinson*

1/15/07

Signature

Date