

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

ADDRESS (number and street) 3350 RIVERWOOD PKWY
SUITE 1400
ATLANTA GA 30339
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00407080 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 03 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Slusser

Signature of Treasurer Eric Slusser [Electronically Filed] Date 04 / 16 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="51130.94"/> | <input type="text" value="51130.94"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="65746.57"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="7515.60"/> | <input type="text" value="26045.60"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="73262.17"/> | <input type="text" value="77176.54"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="1057.38"/> | <input type="text" value="4971.75"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="72204.79"/> | <input type="text" value="72204.79"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 5670.60 | 13977.10 |
| (ii) Unitemized | 1845.00 | 12068.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶ | 7515.60 | 26045.60 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 7515.60 | 26045.60 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 7515.60 | 26045.60 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 7515.60 | 26045.60 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 57.38 | 171.75 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 57.38 | 171.75 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 1000.00 | 4800.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 1057.38 | 4971.75 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1057.38 | 4971.75 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 7515.60 | 26045.60 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 7515.60 | 26045.60 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 57.38 | 171.75 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 57.38 | 171.75 |

**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 22 |
| <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 |

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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. John Aurelio | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10898 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Regional VP Nursing Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| Bi-weekly payroll deduction - \$40 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mara Benner | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10903 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 380.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Vice President Government Affairs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1330.00 | |
| Bi-weekly payroll deduction - \$190 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Cathy Blanchard | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10904 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation AVP Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| Bi-weekly payroll deduction - \$40 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 540.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**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 7 OF 22 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Adam Brooks | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10908 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 70.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Director - Regional Rehab |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 245.00 | |
| Bi-weekly Payroll Deduction - \$35 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Robert Brunson | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10909 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 100.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation AVP - Sales |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |
| Bi-weekly Payroll Deduction - \$50 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. David Causby | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10912 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 200.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation VP - Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |
| Bi-weekly Payroll Deduction - \$100 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**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 8 OF 22 |
| <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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Tanya Champion | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10914 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 60.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$30 |
| Name of Employer Gentiva Occupation Area Director Operations | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Raymond Clark | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10915 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$40 |
| Name of Employer Gentiva Occupation Reg. Director Clinical - Hospice | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Stephen Collins | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10917 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 60.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$30 |
| Name of Employer Gentiva Occupation AVP - Real Estate | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 9 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)
A. Michael Craig

Mailing Address 3350 Riverwood Pkwy
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.10919

Amount of Each Receipt this Period **70.00**

Bi-weekly Payroll Deduction - \$35

Full Name (Last, First, Middle Initial)
B. Ronald Crossno

Mailing Address 3350 Riverwood Parkway
 Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Dir- National Medical

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.10920

Amount of Each Receipt this Period **140.00**

Bi-weekly Payroll Deduction - \$70

Full Name (Last, First, Middle Initial)
c. David Cygan

Mailing Address 3350 Riverwood Pkwy
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **266.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.10922

Amount of Each Receipt this Period **76.00**

Bi-weekly Payroll Deduction - \$38

SUBTOTAL of Receipts This Page (optional)..... ► **286.00**

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

**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 22 |
| | (check only one) |
| <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"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Connie Dolin | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10925 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 60.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction \$30 | |
| Name of Employer Gentiva | Occupation Area Dir - Operations (HH) | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Shannon Drake | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10926 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 140.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction \$70 | |
| Name of Employer Gentiva | Occupation VP - Assoc Gen Counsel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 490.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mary Elkin | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10929 |
| Mailing Address 3350 Riverwood Pkwy | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$40 | |
| Name of Employer Gentiva | Occupation AVP - Sales Support | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 280.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 22
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)
A. David Eubanks

Mailing Address 3350 Riverwood Parkway
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Occupation AVP - Clinical Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11AI.10931

Amount of Each Receipt this Period
100.00

Bi-weekly Payroll Deduction - \$50

Full Name (Last, First, Middle Initial)
B. John Friedman

Mailing Address 3350 Riverwood Pkwy
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales (HH)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11AI.10935

Amount of Each Receipt this Period
60.00

Bi-weekly Payroll Deduction - \$30

Full Name (Last, First, Middle Initial)
C. Dave Gieringer

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Inc. Occupation Vice President Acctg / Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11AI.10938

Amount of Each Receipt this Period
150.00

Bi-weekly Payroll Deduction - \$75

SUBTOTAL of Receipts This Page (optional).....▶ **310.00**

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

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

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

FOR LINE NUMBER: PAGE 12 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)
A. Mary Ann Gregory

Mailing Address 3350 Riverwood Parkway
 Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Occupation RVP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 03 / 31 / 2014
Transaction ID : SA11AI.10939

Amount of Each Receipt this Period
 100.00

Bi-weekly Payroll Deduction - \$50

Full Name (Last, First, Middle Initial)
B. Joley Hine

Mailing Address 3350 Riverwood Pkwy
 Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Area Director - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 03 / 31 / 2014
Transaction ID : SA11AI.10947

Amount of Each Receipt this Period
 60.00

Bi-weekly Payroll Deduction - \$30

Full Name (Last, First, Middle Initial)
C. Monica Hullinger

Mailing Address 3350 Riverwood Pkwy
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services, Inc. Occupation VP - Home Health Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 03 / 31 / 2014
Transaction ID : SA11AI.10948

Amount of Each Receipt this Period
 80.00

Bi-weekly Payroll Deduction - \$40

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)
A. Andrew Johnson

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11Al.10950

Amount of Each Receipt this Period
60.00

Bi-weekly Payroll Deduction - \$30

Full Name (Last, First, Middle Initial)
B. Dean Johnson

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Division VP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11Al.10951

Amount of Each Receipt this Period
200.00

Bi-weekly Payroll Deduction - \$100

Full Name (Last, First, Middle Initial)
C. Debbie Ann Kearns

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11Al.10952

Amount of Each Receipt this Period
60.00

Bi-weekly Payroll Deduction - \$30

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00

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

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 14 OF 22 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Rebecca Knight | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10955 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation AVP - Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| | | Bi-weekly Payroll Deduction - \$40 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Christopher Macinnis | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10958 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 120.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation RVP - Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| | | Bi-weekly Payroll Deduction - \$60 |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Kevin Marrazzo | | Date of Receipt MM / DD / YYYY 03 / 21 / 2014 Transaction ID : SA11AI.11015 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 250.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Assistant Vice President Legal |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| | | one-time contribution |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 OF 22 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Russ McDonough | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10961 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 200.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Chief Information Officer |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |
| | | Bi-weekly Payroll Deduction - \$100 |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mary Muchow | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10966 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 60.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Director Field Audit |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |
| | | Bi-weekly Payroll Deduction - \$30 |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Benjamin Peirce | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10975 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Manager Wound Care |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| | | Bi-weekly Payroll Deduction - \$40 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 22
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

A. Jerrold Perchik
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Assoc Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11Al.10976

Amount of Each Receipt this Period **100.00**

Bi-weekly Payroll Deduction - \$50

B. Leland Pierce
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Area Rehab Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11Al.10977

Amount of Each Receipt this Period **60.00**

Bi-weekly Payroll Deduction - \$30

C. Perry Pruett
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Div VP - Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11Al.10978

Amount of Each Receipt this Period **140.00**

Bi-weekly Payroll Deduction - \$70

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 17 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

A. Andrew Rauch
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy Ste 1400
 City Atlanta State GA Zip Code 30339
 Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.10980
 Amount of Each Receipt this Period 60.00
 Bi-weekly Payroll Deduction - \$30
 FEC ID number of contributing federal political committee. C
 Name of Employer Gentiva Occupation Financial Analyst Reg - Sr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

B. Todd Sexe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy Ste 1400
 City Atlanta State GA Zip Code 30339
 Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.10987
 Amount of Each Receipt this Period 200.00
 Bi-weekly Payroll Deduction - \$100
 FEC ID number of contributing federal political committee. C
 Name of Employer Gentiva Health Services Inc. Occupation VP Home Health Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

C. Jeff Shaner
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy Ste 1400
 City Atlanta State GA Zip Code 30339
 Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.10988
 Amount of Each Receipt this Period 200.00
 Bi-weekly Payroll Deduction - \$100
 FEC ID number of contributing federal political committee. C
 Name of Employer Gentiva Occupation Division VP of Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

SUBTOTAL of Receipts This Page (optional).....▶ 460.00
TOTAL This Period (last page this line number only).....▶

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 18 OF 22 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Paula Shoemaker | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10990 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$40 |
| Name of Employer Gentiva Occupation VP - Sales Support & Marketing | Aggregate Year-to-Date 280.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Susan P Smith | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10992 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 170.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$85 |
| Name of Employer Gentiva Health Services Occupation VP Clinical Practice & Research | Aggregate Year-to-Date 595.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Paul Stein | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10993 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 100.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly Payroll Deduction - \$50 |
| Name of Employer Gentiva Occupation VP - IS | Aggregate Year-to-Date 350.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**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 19 OF 22 |
| <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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Harmon Strange | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10994 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 384.60 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly Payroll Deduction - \$192.30 |
| Name of Employer Gentiva Health Services Inc. | Occupation President & CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1346.10 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Deborah Suit | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10995 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 200.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly Payroll Deduction - \$100 |
| Name of Employer Gentiva | Occupation VP - Training and Development | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Timothy Swann | | Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : SA11AI.10997 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 80.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly Payroll Deduction - \$40 |
| Name of Employer Gentiva | Occupation Area Director Sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 664.60 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 20 OF 22
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <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)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

A. Trevor Sylvestre
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Director - Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.10998

Amount of Each Receipt this Period **70.00**

Bi-weekly Payroll Deduction - \$35

B. Gena Wagner
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services, Inc. Occupation AVP - Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.11003

Amount of Each Receipt this Period **100.00**

Bi-weekly Payroll Deduction - \$50

C. Charlotte Weaver
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services, Inc. Occupation Chief Clinical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : SA11AI.11005

Amount of Each Receipt this Period **100.00**

Bi-weekly Payroll Deduction - \$50

SUBTOTAL of Receipts This Page (optional)..... ▶ **270.00**

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

**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 21 OF 22 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

A. Damien Weston
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11Al.11007

Amount of Each Receipt this Period
150.00

Bi-weekly Payroll Deduction - \$75

B. James Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Parkway
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Risk Mgt.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
03 / 31 / 2014
Transaction ID : SA11Al.11010

Amount of Each Receipt this Period
140.00

Bi-weekly Payroll Deduction - \$70

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 290.00 |
| TOTAL This Period (last page this line number only).....▶ | 5670.60 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)

A. MCCONNELL SENATE COMMITTEE '14

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: KY District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 18 | / | 2014 |

Transaction ID : SB23.10893

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
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| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

| |
|---------|
| 1000.00 |
|---------|

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| 1000.00 |
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