

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines 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 C00407080 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on 08 03 2010 in the State of MI (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 07 01 2010 through 07 14 2010

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 Electronically Filed by Eric Slusser Date 10 14 2010

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

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
1	4

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		17635.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	53800.96									
(c) Total Receipts (from Line 19)	5022.15	70554.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	58823.11	88190.32								
7. Total Disbursements (from Line 31)	9000.00	38367.21								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49823.11	49823.11								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
1	4

Y	Y	Y	Y
2	0	1	0

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)	4544.15	51440.70
(ii) Unitemized	478.00	19114.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5022.15	70554.80
(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)	5022.15	70554.80
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 Transfer (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))	5022.15	70554.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5022.15	70554.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	367.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	367.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	38000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	9000.00	38367.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	38367.21

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	5022.15	70554.80
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5022.15	70554.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	367.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	367.21

**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 / 43
	<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

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

A.	Full Name (Last, First, Middle Initial) Scott Allen	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6904
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Area Director Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) John Aurelio	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6905
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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) <input type="checkbox"/> Aggregate Year-to-Date 510.00	

C.	Full Name (Last, First, Middle Initial) Brian Bacon	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6906
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Branch Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 210.00	

SUBTOTAL of Receipts This Page (optional)	80.00
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 7 / 43
(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

A.	Full Name (Last, First, Middle Initial) Camille Bagwell		Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6907		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 25.00	
	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 ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Jeffrey Barr		Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6908		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Gentiva	Occupation AVP - Sales			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			

C.	Full Name (Last, First, Middle Initial) Selece Beasley		Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6910		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Gentiva	Occupation Director Compliance			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional)	▶	95.00
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 / 43
	<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.	Full Name (Last, First, Middle Initial) Mara Benner		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 07 / 14 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6911
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		150.00	
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 ▼ 2100.00		

B.	Full Name (Last, First, Middle Initial) Susan Benoit		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 07 / 14 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6912
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer Gentiva		Occupation RVP - Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

C.	Full Name (Last, First, Middle Initial) Judy Bernath		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 07 / 14 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.6913
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.00	
Name of Employer Gentiva Health Services Inc.		Occupation Area Director		
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)	▶	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 / 43
(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.

Full Name (Last, First, Middle Initial) Joseph Bettini		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6914
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation Director Operations Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.

Full Name (Last, First, Middle Initial) Cathy Blanchard		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3 Huntington Quadrangle Suite 200S		Transaction ID: SA11AI.6915
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva Health Services Inc.	Occupation Area Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.

Full Name (Last, First, Middle Initial) Shane Brinkerhoff		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6917
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	115.00
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 10 / 43
	<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.	Full Name (Last, First, Middle Initial) Stacy Bromell	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6918
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

B.	Full Name (Last, First, Middle Initial) Adam Brooks	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6919
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 35.00
	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 420.00	

C.	Full Name (Last, First, Middle Initial) Robert Brunson	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6920
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 510.00	

SUBTOTAL of Receipts This Page (optional)	100.00
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 / 43
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial) John Camperlengo		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6923
City Atlanta	State GA	Zip Code 33039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Gentiva Health Services, Inc.	Occupation SVP, CCO & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Bruce Carter		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3 Huntington Quadrangle Suite 200S		Transaction ID: SA11AI.6926
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Gentiva Health Services Inc.	Occupation RVP - Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) David Causby		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6928
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 1220.00	

SUBTOTAL of Receipts This Page (optional)	▶	145.00
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 / 43

(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.

Full Name (Last, First, Middle Initial)

James Costain

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6931

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Michael Craig

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6932

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Barbara Cundiff

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

FEC ID number of contributing federal political committee.

C

Name of Employer
Gentiva Health Services Inc.

Occupation
Area Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6933

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

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 / 43
(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.

Full Name (Last, First, Middle Initial) Patrick Cunningham		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6934
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Gentiva	Occupation AVP - Reg Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) David Cygan		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6935
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
Name of Employer Gentiva	Occupation VP - Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

C.

Full Name (Last, First, Middle Initial) Douglas Dahlgard		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6936
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Gentiva Health Services Inc.	Occupation Vice President Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

SUBTOTAL of Receipts This Page (optional)	93.00
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 14 / 43
(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. Full Name (Last, First, Middle Initial)
John Destefanis

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 RVP - Hospice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: MM / DD / YYYY
07 / 14 / 2010

Transaction ID: SA11AI.6938

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Catherine Deveer

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 ▼ 300.00

Date of Receipt: MM / DD / YYYY
07 / 14 / 2010

Transaction ID: SA11AI.6939

Amount of Each Receipt this Period: 25.00

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

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 Gentiva Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: MM / DD / YYYY
07 / 14 / 2010

Transaction ID: SA11AI.6940

Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 / 43
(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. Full Name (Last, First, Middle Initial)
Marion Donahue

Mailing Address 3350 Riverwood Pkwy
Ste

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Reg Dir - Clinical Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6941
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Indy Edwards

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 - Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6943
Amount of Each Receipt this Period 70.00

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

Mailing Address 3350 Riverwood Pkwy

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6944
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 130.00

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 / 43
(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. Full Name (Last, First, Middle Initial)
Julie Erickson

Mailing Address 3 Huntington Quadrangle
Suite 200S

City State Zip Code
Melville NY 11747

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

Name of Employer Occupation
Gentiva Health Services Inc. Reg Director - Clinical Operations

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6945

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Philip Filippelli

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva VP - Appl Dev & Tech

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6947

Amount of Each Receipt this Period
40.00

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

Mailing Address 3350 Riverwood Pkwy

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva AVP - Operations

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6948

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 / 43

(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.

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

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6949

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
Teresa Gregory

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6952

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Michael Grieco

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Health Services AVP - Finance
Inc.

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 490.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6953

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

135.00

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 18 / 43
	<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.	Full Name (Last, First, Middle Initial) Lisa Grilli	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6954
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP - Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 480.00	

B.	Full Name (Last, First, Middle Initial) Nancy Guerland	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6955
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 520.00	

C.	Full Name (Last, First, Middle Initial) Mary Hahn	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6957
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Regional Director - Clinical Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 240.00	

SUBTOTAL of Receipts This Page (optional)	100.00
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 19 / 43

(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.

Full Name (Last, First, Middle Initial)
Mary Hahn

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Regional Director - Clinical Ops

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6958

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
John Hamilton

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva VP - Compliance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6960

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Teresa Harrell

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Regional Director - HR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6961

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶

85.00

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 20 / 43

(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.

Full Name (Last, First, Middle Initial)
Jane Heideman

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer
Gentiva Health Services Inc.

Occupation
AVP - Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6965

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)
Timothy Hock

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer
Gentiva

Occupation
AVP - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6967

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Ann Hodges

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer
Gentiva

Occupation
HR Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.6968

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

125.00

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 21 / 43
(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. Full Name (Last, First, Middle Initial)
Pamela Hopewell

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 - Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6969
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
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 ▼ 520.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6970
Amount of Each Receipt this Period 40.00

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

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 RVP - Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6971
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 22 / 43
	<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.	Full Name (Last, First, Middle Initial) Jorie Jacobs			Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400			Transaction ID: SA11AI.6972		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 50.00		
	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 ▼ 600.00				

B.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400			Transaction ID: SA11AI.6973		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 60.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer Gentiva Health Services Inc.		Occupation RVP Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 760.00				

C.	Full Name (Last, First, Middle Initial) John Karr			Date of Receipt MM / DD / YYYY 07 / 14 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400			Transaction ID: SA11AI.6978		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 50.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer Gentiva		Occupation VP - Compensation & Benefits			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00				

SUBTOTAL of Receipts This Page (optional)	▶	160.00
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 23 / 43
	<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.	Full Name (Last, First, Middle Initial) Debbie Ann Kearns	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6979
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Donna Kinsella	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6981
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Reg Dir - Clinical Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Jennifer Kisluk	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6982
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Finance Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 24 / 43
	<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.	Full Name (Last, First, Middle Initial) Rebecca Knight	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6983
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 480.00	

B.	Full Name (Last, First, Middle Initial) Robert Koch	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6984
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	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 300.00	

C.	Full Name (Last, First, Middle Initial) James Lee III	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6986
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation VP - Nat'l Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 840.00	

SUBTOTAL of Receipts This Page (optional)	135.00
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 25 / 43
(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

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

A.

Full Name (Last, First, Middle Initial)
JoAnne Little

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 Asst General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 14 / 2010

Transaction ID: SA11AI.6988

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
Robert Little

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 RVP - Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 07 / 14 / 2010

Transaction ID: SA11AI.6989

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Michele Lovato

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 Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 14 / 2010

Transaction ID: SA11AI.6990

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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 26 / 43
	<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.	Full Name (Last, First, Middle Initial) Christopher Macinnis	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6991
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 60.00
	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 720.00	

B.	Full Name (Last, First, Middle Initial) Darlene Mahoney	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6992
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 20.00
	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 240.00	

C.	Full Name (Last, First, Middle Initial) Ronald Malone	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6993
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 190.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Chairman / Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2280.00	

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 27 / 43
	<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.	Full Name (Last, First, Middle Initial) Lawrence Marion	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6994
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Rosa Mascardi	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6996
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Robert Maynard	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6997
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 50.00
	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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	95.00
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 28 / 43
(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. Full Name (Last, First, Middle Initial)
Michelle Mazzone

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 - Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.6998
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Janet Miller

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 ▼ 250.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.7001
Amount of Each Receipt this Period 20.00

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

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 ▼ 600.00

Date of Receipt 07 / 14 / 2010
Transaction ID: SA11AI.7003
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 29 / 43
(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.

Full Name (Last, First, Middle Initial) Constance Mrosek		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7004
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation AVP - Operations	Aggregate Year-to-Date 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mary Muchow		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7005
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Gentiva Health Services Inc.	Occupation Director Field Audit	Aggregate Year-to-Date 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Deana Murphy		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7006
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Gentiva Health Services Inc.	Occupation Branch Director	Aggregate Year-to-Date 320.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 30 / 43
	<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.	Full Name (Last, First, Middle Initial) Karen Negri	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.7009
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP - Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 825.00	

B.	Full Name (Last, First, Middle Initial) Margo Nemet	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.7010
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Director Compliance Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 204.00	

C.	Full Name (Last, First, Middle Initial) Derek Nordman	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.7012
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Dir - Regional Rehab Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 240.00	

SUBTOTAL of Receipts This Page (optional)	60.00
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 31 / 43
(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.

Full Name (Last, First, Middle Initial) Laurie O'Hara		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7015
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Gentiva	Occupation AVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Stephen Paige		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7016
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Gentiva Health Services Inc.	Occupation Senior Vice President/General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

C.

Full Name (Last, First, Middle Initial) Charlotte Parker		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7017
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Gentiva	Occupation AVP - Hospice	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 32 / 43

(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.

Full Name (Last, First, Middle Initial)
Benjamin Peirce

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Health Services Manager Wound Care
Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7018

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Patricia Phillips

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva AVP - Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7019

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Samuel Proctor

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva AVP - Benefits & HR Svc Ctr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7022

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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 33 / 43
(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. Full Name (Last, First, Middle Initial)
Robert Radics

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 - Business Initiatives

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 07 / 14 / 2010
Transaction ID: SA11AI.7024
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Bruce Reardon

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 HR Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 07 / 14 / 2010
Transaction ID: SA11AI.7026
Amount of Each Receipt this Period: 20.00

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

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 Regional Rehab

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 07 / 14 / 2010
Transaction ID: SA11AI.7027
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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 34 / 43
(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.

Full Name (Last, First, Middle Initial) Mary Jo Rinkewich		Date of Receipt MM / DD / YYYY 07 / 14 / 2010	
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7028	
City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 28.85
FEC ID number of contributing federal political committee. C			
Name of Employer Gentiva	Occupation AVP - Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.20		

B.

Full Name (Last, First, Middle Initial) Elizabeth Scanlon		Date of Receipt MM / DD / YYYY 07 / 14 / 2010	
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7032	
City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 40.00
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 ▼ 480.00		

C.

Full Name (Last, First, Middle Initial) Todd Sexe		Date of Receipt MM / DD / YYYY 07 / 14 / 2010	
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7033	
City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gentiva Health Services Inc.	Occupation VP Home Health Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

SUBTOTAL of Receipts This Page (optional)	▶	108.85
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 35 / 43
(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.

Full Name (Last, First, Middle Initial) Jeff Shaner		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7035
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Gentiva	Occupation Division VP of Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

B.

Full Name (Last, First, Middle Initial) Paula Shoemaker		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7037
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation VP - Sales Support & Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

C.

Full Name (Last, First, Middle Initial) Eric Slusser		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7040
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Gentiva	Occupation Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	▶	290.00
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 36 / 43
(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.

Full Name (Last, First, Middle Initial) Ruth Smith		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7041
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Gentiva	Occupation Branch Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Joey Spearman		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7042
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation AVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.

Full Name (Last, First, Middle Initial) Eugenia Spencer		Date of Receipt MM / DD / YYYY 07 / 14 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.7043
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation SVP - Shared Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	115.00
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 37 / 43
	<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.	Full Name (Last, First, Middle Initial) Frederick Spight		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7044
Name of Employer Gentiva		Occupation AVP - Purchasing & Supply Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 45.00
		<input type="text"/> 540.00	

B.	Full Name (Last, First, Middle Initial) Paul Stein		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7045
Name of Employer Gentiva		Occupation VP - IS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 600.00	

C.	Full Name (Last, First, Middle Initial) Harmon Strange		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7047
Name of Employer Gentiva Health Services Inc.		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 2307.60	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 287.30
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 43

(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.

Full Name (Last, First, Middle Initial)
Timothy Swann

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Area Director Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7049

Amount of Each Receipt this Period

40.00

B.

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

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva Director - Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7050

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
Gordon Thoennes

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City State Zip Code
Atlanta GA 30339

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

Name of Employer Occupation
Gentiva RVP - Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.7052

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

115.00

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 39 / 43
	<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.	Full Name (Last, First, Middle Initial) Gena Wagner		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7058
Name of Employer Gentiva Health Services, Inc.		Occupation AVP - Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Charlotte Weaver		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7059
Name of Employer Gentiva Health Services, Inc.		Occupation Chief Clinical Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1350.00	<input type="text"/> 100.00

C.	Full Name (Last, First, Middle Initial) Damien Weston		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 14 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7060
Name of Employer Gentiva		Occupation AVP - Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 40 / 43
(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. Full Name (Last, First, Middle Initial)
Cheryl White

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 Director Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 14 / 2010

Transaction ID: SA11AI.7061

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Melissa Wilbanks

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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 14 / 2010

Transaction ID: SA11AI.7062

Amount of Each Receipt this Period
25.00

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

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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 14 / 2010

Transaction ID: SA11AI.7065

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 41 / 43	
	(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"/> 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.	Full Name (Last, First, Middle Initial) Michael Young		Date of Receipt		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 07 / 14 / 2010		
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.7067	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00		
	Name of Employer Gentiva Health Services Inc.		Occupation RVP - Sales		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1130.00		

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	4544.15

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

<p>A. Full Name (Last, First, Middle Initial) DAVID LEE CAMP</p> <p>Mailing Address 5905 Wimbledon Ct.</p> <p>City Midland State MI Zip Code 48642</p> <p>Purpose of Disbursement 003 Category/Type</p> <p>Candidate Name DAVID LEE CAMP</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04</p>	<p>Transaction ID: SB23.6658 Date of Disbursement: 07 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) SUSAN M COLLINS</p> <p>Mailing Address 175 CLYDE ROAD</p> <p>City BANGOR State ME Zip Code 04401</p> <p>Purpose of Disbursement 003 Category/Type</p> <p>Candidate Name SUSAN M COLLINS</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ME District: 00</p>	<p>Transaction ID: SB23.6659 Date of Disbursement: 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) J. PHILLIP GINGREY</p> <p>Mailing Address 632 N. St. Marys Lane</p> <p>City Marietta State GA Zip Code 30064</p> <p>Purpose of Disbursement 003 Category/Type</p> <p>Candidate Name J. PHILLIP GINGREY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 11</p>	<p>Transaction ID: SB23.6662 Date of Disbursement: 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**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

A.	Full Name (Last, First, Middle Initial) JIM P MCGOVERN	Transaction ID: SB23.6660 Date of Disbursement
	Mailing Address 393 BURNCOAT ST	<input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Worcester State MA Zip Code 01606	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name JIM P MCGOVERN	<input type="text" value="003"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JIM P MCGOVERN	Transaction ID: SB23.6661 Date of Disbursement
	Mailing Address 393 BURNCOAT ST	<input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Worcester State MA Zip Code 01606	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name JIM P MCGOVERN	<input type="text" value="003"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THOMAS EDMUNDS PRICE	Transaction ID: SB23.6664 Date of Disbursement
	Mailing Address P.O. Box 425	<input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Roswell State GA Zip Code 30077	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name THOMAS EDMUNDS PRICE	<input type="text" value="003"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="9000.00"/>