Image# 14970779232					PAGE 1 / 38
	EPORT OF R ND DISBURS Other Than An Autho	<b>EMENT</b>	S	Office	lse Only
	PE OR PRINT V	Example: If typir	ng, type	2FE4M5	
COMMITTEE (in full)		over the lines.			
GENTIVA HEALTH SER					
ADDRESS (number and street)	350 RIVERWOOD PKWY				
Check if different	UITE 1400				
than previously reported. (ACC)				GA 3033	9
2. FEC IDENTIFICATION NUMB	ER V CITY	•	STA		ZIP CODE
C C00407080	3. IS T REF		IEW N) <b>OR</b>	AMENDED (A)	
<ul> <li>4. TYPE OF REPORT (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> <li>July 15 Quarterly Report (Q2)</li> <li>October 15 Quarterly Report (Q3)</li> <li>January 31</li> </ul>	(b) Monthly Report Due On: Apr 20 (c) 12-Day PRE-Election Report for the:	) (M3)	12C)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 31 Mid-Year         Report (Non-election         Year Only) (MY)         Termination Report (TER)	(d) 30-Day POST-Election Report for the:	General (30G	i) / Y	Runoff (30R)	State of Special (30S) in the State of
5. Covering Period		through	M M /	3120	114
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of m	y knowledge and b	pelief it is true, o	correct and comple	ete.
Signature of Treasurer		[Electronically	Filed] Date		5 / 2014
NOTE: Submission of false, erroneous	, or incomplete information n	nay subject the pers	on signing this F	Report to the penalt	ies of 2 U.S.C. §437g.
Office Use Only					<b>C FORM 3X</b> Rev. 12/2004

09/16/2014 12 : 51

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

# GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

R	eport Covering the Period: From:	8 / D D / Y Y Y Y 8 01 2014 To:	M         M         /         D         D         /         Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		51130.94
	(b) Cash on Hand at Beginning of Reporting Period	77109.72	
	(c) Total Receipts (from Line 19)	11755.90	72924.90
	<ul><li>(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)</li></ul>	88865.62	124055.84
7.	Total Disbursements (from Line 31)	534.92	35725.14
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	88330.70	88330.70
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

X

DE FEC Form 3X (Rev. 06/2004)	TAILED SUMMARY PAGE of Receipts	Page <b>3</b>
		Faye 3
Write or Type Committee Name		
GENTIVA HEALTH SERVICES INC	PAC GENTIVAPAC	
M = M		M = M / D = D / Y = Y = Y
Report Covering the Period: From: 08	01 2014 To:	08 31 2014
	COLUMN A	COLUMN B
I. Receipts	Total This Period	Calendar Year-to-Date
11. Contributions (other than loans) From:	L. L	
(a) Individuals/Persons Other		
Than Political Committees	10507.00	5040740
(i) Itemized (use Schedule A)	10587.90	52497.40
		20427 50
(ii) Unitemized	1168.00	20427.50
(iii) TOTAL (add	11755.90	72924.90
Lines 11(a)(i) and (ii)▶	7 11733.90	12324.30
(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)▶	11755.90	72924.90
12. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
10 All Loope Descined	0.00	0.00
13. All Loans Received		
	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	/7	
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
1	0.00	
(b) Levin Funds (from Schedule H5)	0.00	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))▶	11755.90	72924.90
, , , , , , , , , , , , , , , , , , , ,		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	11755.90	72924.90
L	7	

### DETAILED SUMMARY PAGE

II. Disbu	rsements	COLUMN A	COLUMN B			
Operating Expenditu	ires: —	Total This Period	Calendar Year-to-Date			
(a) Allocated Feder Activity (from S	ral/Non-Federal					
	are	0.00	0.0			
(ii) Non-Feder	al Share	0.00	0.00			
(b) Other Federal (						
Expenditures		34.92	400.14			
(c) Total Operating		34.92	400.14			
Transfers to Affiliate	a)(ii), and (b))▶ d/Other Partv	J <del>1</del> .32	400.1			
Committees		0.00	0.00			
Contributions to Federal Candidates/ and Other Political (	Committees Committees	-2000.00	32800.00			
Independent Expendent		0.00				
Coordinated Party E	xpenditures	0.00	0.00			
(2 U.S.C. §441a(d))	·····	0.00	0.00			
Loan Repayments N	/lade	0.00	0.00			
Loans Made Refunds of Contribu	tions To:	0.00	0.00			
(a) Individuals/Pers		0.00	25.00			
(b) Political Party (	Committees	0.00	0.00			
(c) Other Political ( (such as PACs)	Committees	0.00	0.00			
(d) Total Contributio (add Lines 28(a	on Refunds a), (b), and (c))►	0.00	25.00			
Other Disbursement	s	2500.00	2500.00			
	ivity (2 U.S.C. §431(20)) al Election Activity					
(from Schedule	-					
	re	0.00	0.00			
(ii) "I evin" Sha	re	0.00	0.00			
	n Activity Paid Entirely					
	al Funds	0.00	0.00			
	lection Activity (add 30(a)(ii) and 30(b))►	0.00	0.00			
Total Disbursements	a (add Lines 21(c), 22,					
	28(d), 29 and 30(c))	534.92	35725.14			
Total Federal Disbu	sements					
	(ii) and Line 30(a)(ii)	534.92	35725.14			
	▶					

FE6AN026

I

### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures			
<ul> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ul>	11755.90	72924.90	
. Total Contribution Refunds (from Line 28(d))	0.00	25.00	
<ul> <li>Net Contributions (other than loans) (subtract Line 34 from Line 33)</li> </ul>	11755.90	72899.90	
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	34.92	400.14	
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
. Net Operating Expenditures (subtract Line 37 from Line 36)	34.92	400.14	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 6 OF

	· · <b>_ · _ · · · ·</b> · ·		Detailed Summary Page	×	11a		11b 14	11c	12	<b>□</b> ₁-	
	y information copied from such Reports and S						pose of				
	for commercial purposes, other than using the	e name and a	ddress of any political committe	e to sol	icit co	ntrib	outions f	from suc	h commit	tee.	
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	GENTIVAPAC								
۱.	Full Name (Last, First, Middle Initial) Patricia Aarthun			[	Date of	f Re	eceipt				
	Mailing Address 3350 Riverwood Pkwy Ste 1400			м м 08	1	31	) / Y	ү ү 2014	Y		
	City	State	Zip Code		Trans	sacti	ion ID :	SA11AI.	11772		
	Atlanta	GA	30339	A	mount	t of	Each R	leceipt th	nis Period		
	FEC ID number of contributing federal political committee.	С					,	7	1 1 0	0.00	
	Name of Employer	Occupation		— Bi	i-week	ly pa	ayroll de	eduction -	\$30		
	Gentiva	Dir - Payrol									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) v	]									
	Full Name (Last, First, Middle Initial) Vicki Arant				Date of	f Re	eceipt				
	Mailing Address 3350 Riverwood Parkway Suite 1400		Zip Code		08 31 2014						
	City		Trans	acti	on ID :	SA11AI.	11774				
	Atlanta	A	mount	t of	Each R	leceipt th	nis Period				
	FEC ID number of contributing federal political committee.		45.00								
	Name of Employer	Occupation		— Bi	<ul> <li>Bi-weekly payroll deduction - \$15</li> </ul>						
	Gentiva	Executive D	irector - Hospice								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	]							
	Full Name (Last, First, Middle Initial) John Aurelio				Date of	f Re	ceipt				
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08		31	) / Y	2014	Y	
		State	Zip Code		Trans	sacti	ion ID :	SA11AI	11775		
	Atlanta	GA	30339	A	moun	t of	Each R	leceipt th	nis Period		
	FEC ID number of contributing federal political committee.	С					,			).00	
	Name of Employer	Occupation		В	i-week	ly pa	ayroll de	eduction ·	- \$40		
	Gentiva Health Services Inc.										
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General			1							
	Other (specify)		720.00	4							
s	JBTOTAL of Receipts This Page (optional)						7	1 1	255	.00	
т	OTAL This Period (last page this line number	only)					,				

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 7 OF

		Detailed Summary Page	×	-		11		11c		12	<u> </u>		
An	y information copied from such Reports and for commercial purposes, other than using the	Statements ma	A not be sold or used by any period dates of any political committee	erson fo	13 or the icit cor	purp ptrib	14 pos	se of s	15 oliciting		16 ntribut	17 ions	
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES												
A.	Full Name (Last, First, Middle Initial) Camille Bagwell				Date of	f Re	ecei	pt					
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Chata	7in Oode		08 31 2014								
	City Atlanta	State GA	Zip Code 30339	Transaction ID : SA11AI.11776           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		75.00									
	Name of Employer Gentiva	Occupation AVP - Oper		— Bi	-weekl	ly pa	ayrc	oll ded	uction -	\$25	Ď		
	Receipt For: Primary General	· · ·	Year-to-Date ▼										
	Other (specify) V 450.00												
— В.	Full Name (Last, First, Middle Initial) Kelly Baker	l		Date of	f Re	ecei	pt						
	Mailing Address 3350 Riverwood Pkwy Suite 1400		Zip Code		08 / D D / Y Y Y Y Y 2014								
	City Atlanta						A11AL						
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 45.00 Bi-weekly payroll deduction - \$15										
	Name of Employer Gentiva Health Services	Bi											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00										
с.	Full Name (Last, First, Middle Initial) Selece Beasley				Date of	f Re	ecei	pt					
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	ľ	D D 31	/ Y		) 14	Y	
	City Atlanta	State GA	Zip Code 30339	A					A11AI. ceipt th				
	FEC ID number of contributing federal political committee.	С					5					00	
	Name of Employer	Occupation		Bi	Bi-weekly payroll deduction - \$20								
	Gentiva	_											
	Receipt For: Primary General												
	Other (specify) ▼												
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number		<b>r</b>		-		,	-	7		180.	00	

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 8 OF

		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using the									
GENTIVA HEALTH SERVICES	S INC PAC	GENTIVAPAC							
Full Name (Last, First, Middle Initial) Stephen Bell Mailing Address 3350 Riverwood Parkway Suite 1400 City	State	Zip Code	Date of Receipt						
Atlanta	GA	30339	Transaction ID : SA11AI.11779 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		45.00						
Name of Employer Gentiva Health Services Receipt For: Primary General Other (specify)	Occupation Area Directo Aggregate	r Sales Year-to-Date ▼ 270.00	Bi-weekly payroll deduction - \$15						
Full Name (Last, First, Middle Initial) Mara Benner Mailing Address 3350 Riverwood Pkwy Ste 1400		Date of Receipt							
City Atlanta FEC ID number of contributing federal political committee.	State GA	Transaction ID : SA11AI.11780         Amount of Each Receipt this Period         570.00							
Name of Employer Gentiva Health Services Inc. Receipt For: Primary General Other (specify)	1	nt Government Affairs Year-to-Date ▼ 3420.00	Bi-weekly payroll deduction - \$190						
Full Name (Last, First, Middle Initial) C. Cathy Blanchard			Date of Receipt						
Mailing Address 3350 Riverwood Parkway Suite 1400 City	State	Zip Code	08 31 2014 Transaction ID : SA11AI.11781						
FEC ID number of contributing federal political committee.	5								
Name of Employer Gentiva Health Services Inc.									
Primary General									
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe			735.00						

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 9 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page		1a  3		11b 14	11c			17								
Any information copied from such Reports ar or for commercial purposes, other than using			erson for	the p		ose o	f solicit	ing contr	ributi	ons							
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVIC	ES INC PAC	C GENTIVAPAC															
Full Name (Last, First, Middle Initial) <b>A.</b> Timothy Brittingham			Da	Date of Receipt													
Mailing Address 3350 Riverwood Parkway Suite 1400 City	State	Zip Code	- L	08 31 2014 Transaction ID : SA11AI.11914													
Atlanta	Atlanta GA 30339																
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period													
Name of Employer	Occupation		- Pay	roll de	du	ction											
Gentiva Health Services	AVP - Oper	ations															
Receipt For:																	
Primary General Other (specify) ▼	Primary General Aggregate Teal-to-Date V																
Full Name (Last, First, Middle Initial) B. Adam Brooks		Da	te of	Ree	ceipt												
Mailing Address 3350 Riverwood Pkwy Ste 1400			M	08 31 2014													
City									Transaction ID : SA11AI.11783								
Atlanta	GA	30339	Am	nount	of I	Each F	Receipt	this Per	iod								
FEC ID number of contributing federal political committee.	ů – L							105.00									
Name of Employer Gentiva	Occupation Director - R	egional Rehab	Bi-w	<ul> <li>Bi-weekly payroll deduction - \$35</li> </ul>													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 630.00	]														
Full Name (Last, First, Middle Initial) C. Robert Brunson			Da	te of	Red	ceipt											
Mailing Address 3350 Riverwood Pkwy Ste 1400			IV	08	/	31		Y Y 2014		Y							
City Atlanta	State GA	Zip Code 30339						AI.11784									
	GA	50559	Am	nount	of I	Each F	Receipt	this Per	iod								
FEC ID number of contributing federal political committee.	С		Bis	150.00													
Name of Employer	Occupation		DI-V	Bi-weekly payroll deduction - \$50													
Gentiva Health Services Inc.																	
Receipt For: Primary General Other (specify) ▼																	
SUBTOTAL of Receipts This Page (optional		· · · · · · · · · · · · · · · · · · ·		-		y	7	2	155.0	00							

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 10 OF

		Detailed Summary Page		11a 13	$\square$	11b 14		1c 5	12	
Any information copied from such Reports and or for commercial purposes, other than using t				or the		pose d	of soli	citing	contribu	
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE						unons	5 110111	SUC		100.
Full Name (Last, First, Middle Initial)				ate of	Re	ceipt				
Mailing Address 3350 Riverwood Pkwy Ste 1400			м м 08	/	D 3		Y	ү ү 2014	Y	
City	State	Zip Code		Trans	acti	ion ID	) : SA1	1 <b>AI</b> .′	1786	
Atlanta	GA	33039	A	mount	t of	Each	Rece	pt th	is Period	l
FEC ID number of contributing federal political committee.	С					,		7		5.00
Name of Employer	Occupation		— Bi	-weekl	y pa	ayroll o	deduct	tion -	\$25	
Gentiva Health Services, Inc.	SVP, CCO	& Deputy General Counsel								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	]							
Full Name (Last, First, Middle Initial) B. David Causby				ate of	Re	ceipt				
Mailing Address 3350 Riverwood Pkwy Ste 1400			08 31 YEYEY 2014							
City	State GA	Zip Code 30339		Trans	acti	on ID	: SA1	1AI.1	1788	
Atlanta	A	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.		300.00								
Name of Employer Gentiva	Occupation VP - Operat		— Bi-	<ul> <li>Bi-weekly payroll deduction - \$100</li> </ul>						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1800.00	]							
Full Name (Last, First, Middle Initial) . Tanya Champion				ate of	Re	ceipt				
Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	D 3	D / 81	Y	ү ү 2014	Y
City Atlanta	State GA	Zip Code 30339					) : SA1			
FEC ID number of contributing federal political committee.	С		A	mount	t of	Each	Rece	pt th	is Period 9(	0.00
Name of Employer	Occupation		Bi	-week	ly pa	ayroll o	deduc	tion -	\$30	
Gentiva										
Receipt For:										
Primary General	, iggi egale									
Other (specify)		540.00								
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number					_	3		3	465	.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

		for each category of Detailed Summary F		X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and S or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	C GENTIVAPAC		
Full Name (Last, First, Middle Initial)         Raymond Clark         Mailing Address 3350 Riverwood Parkway         Suite 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify) ▼	<u> </u>	or Clinical - Hospice Year-to-Date ▼	20.00	Date of Receipt 08 / 31 / 2014 Transaction ID : SA11AI.11791 Amount of Each Receipt this Period 120.00 Bi-weekly payroll deduction - \$40
Full Name (Last, First, Middle Initial)         B. Stephen Collins         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify) ▼	State GA C Occupation AVP - Real Aggregate	Estate Year-to-Date ▼	40.00	Date of Receipt 08 / 31 / 2014 Transaction ID : SA11AI.11795 Amount of Each Receipt this Period 90.00 Bi-weekly payroll deduction - \$30
Full Name (Last, First, Middle Initial)         C.       James Costain         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify)	State GA C Occupation AVP - Sales Aggregate	s Year-to-Date ▼	50.00	Date of Receipt 08 / 31 / 2014 Transaction ID : SA11AI.11796 Amount of Each Receipt this Period 75.00 Bi-weekly payroll deduction - \$25
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number				285.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 12 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X         11a         11b         11c         12           13         14         15         16         17						
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	INC PAC	C GENTIVAPAC								
Α.	Full Name (Last, First, Middle Initial) Michael Craig Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		Date of Receipt						
	Atlanta	GA	30339	Transaction ID : SA11AI.11909           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			35.00						
	Name of Employer Gentiva Receipt For: Primary General Other (specify) v	Occupation AVP - Sales Aggregate		0.00	Bi-weekly payroll deduction						
в.	Full Name (Last, First, Middle Initial) Ronald Crossno Mailing Address 3350 Riverwood Parkway		Date of Receipt								
	Suite 1400           City           Atlanta           FEC ID number of contributing federal political committee.	State GA	Zip Code 30339		08     31     2014       Transaction ID : SA11AI.11797       Amount of Each Receipt this Period     210.00						
	Name of Employer Gentiva Receipt For: Primary General	Occupation Dir- Nationa Aggregate		00	Bi-weekly payroll deduction - \$70						
	Uther (specify) ▼ Full Name (Last, First, Middle Initial) Barbara Cundiff	L			Date of Receipt						
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		08 31 2014 Transaction ID : SA11AI.11798						
	Atlanta FEC ID number of contributing federal political committee.	GA	30339		Amount of Each Receipt this Period						
	Name of Employer Gentiva Health Services Inc. Receipt For: Primary General Other (specify)	0.00	Bi-weekly payroll deduction - \$25								
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number				320.00						

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

FOR LINE NUMBER:

PAGE 13 OF

17			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16	⊡.	17
	y information copied from such Reports and s for commercial purposes, other than using th									ntributi	ions	
$\left\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	CGENTIVAPAC									
Α.	Full Name (Last, First, Middle Initial) David Cygan			D	ate of	f Re	ceipt					
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м	/	31	/		014	Y	
	City Atlanta	State GA	Zip Code 30339				<b>on ID :</b> Each F					
	FEC ID number of contributing federal political committee.	С					7			76.	00	]
	Name of Employer Gentiva	Occupation VP - Marke		— Bi-	weekl	ly pa	ayroll de	duction	- \$38	3		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 646.00									
в.	Full Name (Last, First, Middle Initial) Christian Dejesus			D	ate of	f Re	ceipt					
	Mailing Address 3350 Riverwood Parkway Suite 1400 City	State	Zip Code		м м 08	1	31		20	)14	Y	
	Atlanta	GA	30339				on ID :					
	FEC ID number of contributing federal political committee.	C			mount		Each F	receipt	unis P	60.0	00	]
	Name of Employer Gentiva	Occupation	Development - HH	Bi-	weekly	y pa	yroll de	duction	- \$20			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 360.00									
С.	Full Name (Last, First, Middle Initial) Connie Dolin			D	ate of	f Re	ceipt					
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		08	1	31		-	)14	Y	
	Atlanta	GA	30339				i <b>on ID :</b> Each F					
	FEC ID number of contributing federal political committee.	С		Bi	wook	ly na	ayroll de	, duction	. \$3(	90. D	00	
	Name of Employer	Occupation			WCCK	iy po	ayron ac		ψυυ	,		
	Gentiva Receipt For:	Area Dir - C	Operations (HH)	_								
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00									
s	UBTOTAL of Receipts This Page (optional)			. [			9	7		226.0	00	]
т	OTAL 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

			Detailed Summary Page		11a 13	$\vdash$	11b 14	$\vdash$	11c 15	12 16		17
	ny information copied from such Reports and for commercial purposes, other than using the								oliciting	contrib	utions	
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE											
A.	Full Name (Last, First, Middle Initial) Wayne J Douglas				Date of	f Re	eceipt					
	Mailing Address 3350 Riverwood Parkway Suite 1400				м м 08	/	3	D 31	/ Y	ү ү 2014	Y	
	City Atlanta	State GA	Zip Code 30339						A11AI.	<b>11915</b> is Perio	d	
	FEC ID number of contributing federal political committee.	С					7	<u> </u>	,	15	0.00	
	Name of Employer Gentiva Health Services	Occupation VP Commu	nity Care Operations	— P	ayroll c	dedu	uction	- \$7	5			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	]								
в.	Full Name (Last, First, Middle Initial) Shannon Drake	I			Date of	f Re	eceipt					
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	3	D 31	/ Y	y y 2014	Y	
	City Atlanta	State GA	Zip Code 30339		Trans	<b>11802</b> is Perio	d					
	FEC ID number of contributing federal political committee.	С					y		7		0.00	
	Name of Employer Gentiva	Occupation VP - Assoc	Gen Counsel	— Bi	-weekl	у ра	ayroll c	dedu	uction -	\$70		
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 1260.00									
С.	Full Name (Last, First, Middle Initial) Mary Elkin				Date of	f Re	eceipt					
	Mailing Address 3350 Riverwood Pkwy				м м 08	/	3	D 31	/ Y	ү ү 2014	Y	
	City Atlanta	State GA	Zip Code 30339						A11AI. ceipt th	<b>11805</b> is Perio	d	
	FEC ID number of contributing federal political committee.	С			•		,		7		20.00	
	Name of Employer Gentiva	Occupation AVP - Sale		B	I-week	іу ра	ayroll	aeau	uction -	\$40		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 720.00	]								
s	UBTOTAL of Receipts This Page (optional)	I					7		7	48	0.00	]
т	OTAL This Period (last page this line numbe	r only)										1

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 15 OF

	IZED RECEIPTS		for each category Detailed Summary		X         11a         11b         11c         12           13         14         15         16         17
or for	commercial purposes, other than using the				son for the purpose of soliciting contributions o solicit contributions from such committee.
	ME OF COMMITTEE (In Full) ENTIVA HEALTH SERVICES	INC PAC	C GENTIVAPA	С	
<b>A</b> . Ki	Name (Last, First, Middle Initial) m Eplee ling Address 3350 Riverwood Parkway Suite 1400				Date of Receipt
City		State	Zip Code		Transaction ID : SA11AI.11806
Atla	anta	GA	30339		Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С			75.00
Nar	ne of Employer	Occupation			Bi-weekly payroll deduction - \$25
	ntiva Health Services	AVP - Sales	6		
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	450.00	
	Name (Last, First, Middle Initial) avid Eubanks				Date of Receipt
	ling Address 3350 Riverwood Parkway Suite 1400	01.1	7. 0 1		08 / D D / Y Y Y Y Y 2014
City	anta	State GA	Zip Code 30339		Transaction ID : SA11AI.11807
FEC	C ID number of contributing eral political committee.	C	30339		Amount of Each Receipt this Period
	ne of Employer ntiva Health Services	Occupation AVP - Clinic	al Development		Bi-weekly payroll deduction - \$50
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	900.00	
	Name (Last, First, Middle Initial) egina Evans				Date of Receipt
	ling Address 3350 Riverwood Pkwy Suite 1400	01-1-1-	7. 0.1		08 / D D / Y Y Y Y Y 2014
City Atl	anta	State GA	Zip Code 30339		Transaction ID : SA11AI.11808 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С			60.00
Nar	ne of Employer	Occupation	I		Bi-weekly payroll deduction - \$20
	ntiva	AVP - Corp	HR		
	ceipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼	360.00	
	TOTAL of Receipts This Page (optional)				285.00

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

FOR LINE NUMBER:

PAGE 16 OF

17			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16		17
	y information copied from such Reports and s for commercial purposes, other than using the				or the		pose of	solicitir		ntributi	ons	
$\setminus$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES											
			GENTIVAPAC									
Α.	Full Name (Last, First, Middle Initial) John Friedman			[	Date of	f Re	ceipt					
	Mailing Address 3350 Riverwood Pkwy Suite 1400				м м	1	31	) /		014	Y	
	City	State GA	Zip Code 30339		Trans		ion ID :	SA11A	1.1181	12		
	Atlanta	_	30339	_  A	Amoun	t of	Each F	Receipt	this P	'eriod		
	FEC ID number of contributing federal political committee.	С					7			90.	00	
	Name of Employer	Occupation		— B	I-week	ly pa	ayroll de	eduction	- \$30	)		
	Gentiva	AVP - Sales	s (HH)	_								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		540.00									
	Full Name (Last First Middle Initial)		, ,	- -								
В.	Full Name (Last, First, Middle Initial) Cheryl Funk			[	Date of	f Re	ceipt					
	Mailing Address 3350 Riverwood Parkway Suite 1400				м м 08	/	31		y y 20	)14	Y	
	City	State	Zip Code		Trans	acti	on ID :	SA11A	<b>I.118</b> 1	13		
	Atlanta	GA	30339	A	Amoun	t of	Each F	Receipt	this P	'eriod		
	FEC ID number of contributing federal political committee.	С					,			15.0	00	
	Name of Employer	Occupation	1	— Bi	-weekl	y pa	yroll de	duction				
	Gentiva Health Services	Area Directe	or - Sales	_								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		270.00									
<u>с</u>	Full Name (Last, First, Middle Initial) David Garrity				Date of	f Re	ceipt					
•	Mailing Address 3350 Riverwood Pkwy				M M	/	D	0 /	Y Y	Y	Y	
	Ste 1400	Otata	Zin Oada	41	08	1	31			014		
	City Atlanta	State GA	Zip Code 30339	A				SA11A				
	FEC ID number of contributing federal political committee.	С					7			75.	00	]
	Name of Employer	Occupation	1	_ В	i-week	ly pa	ayroll de	eduction	ı - \$25	5		
	Gentiva	Area Direct	or - Sales (HH)									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		450.00									
s	UBTOTAL of Receipts This Page (optional)						7	- 7	_	180.0	00	]
Т	OTAL This Period (last page this line number	only)		.								

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 17 OF

			Detailed Summary Page	×	11a		11b	11c	Ц.	12							
					13		14	15		16	17						
	nformation copied from such Reports and S commercial purposes, other than using the																
		s nume anu a	and the any pointed committee	10 30				nom su	011 0011	itte	<b>.</b>						
/ 0																	
	II Name (Last, First, Middle Initial)																
<u>م.</u> D	ave Gieringer			[	Date of	f Re	eceipt										
Ma	ailing Address 3350 Riverwood Pkwy				M M	/	D	D /	Y Y	Y	Y						
-	Ste 1400			_	08		31		20								
Cit	•	State GA	Zip Code 30339					: SA11A									
	lanta	GA	30339	_ /	Amoun	t of	Each F	Receipt	this Pe	eriod							
	C ID number of contributing	С		225.00													
ied	leral political committee.						-	7	<b>↑</b> ¬-								
Na	me of Employer	Occupation		⊢в	I-week	iy pa	ayroll de	eduction	- \$75								
	entiva Health Services Inc.	Vice Presid	ent Acctg / Controller														
Re	ceipt For:	Aggregate	Year-to-Date ▼														
	Primary General	1250.00															
	Other (specify)		1350.00														
Ful	II Name (Last, First, Middle Initial)																
	lary Ann Gregory			[	Date of	f Re	eceipt										
Ma	iling Address 3350 Riverwood Parkway				M M	/	D	D / T	Y Y	Y	Y						
	Suite 1400				08	1	31		201	4							
Cit	•	State	Zip Code	Transaction ID : SA11AI.11818													
Atl	lanta	GA	30339	Amount of Each Receipt this Period													
	C ID number of contributing	С								150.0	00						
fed	leral political committee.						7		-								
	me of Employer	Occupation		- Bi	-weekl	y pa	yroll de	eduction	- \$50								
Ge	ntiva Health Services	<b>RVP</b> Sales															
Re	ceipt For:	Aggregate	Year-to-Date ▼														
	Primary General																
	Other (specify)		900.00														
Ful	II Name (Last, First, Middle Initial)																
	Ary Griffin			[	Date of	f Re	eceipt										
Ma	ailing Address 3350 Riverwood Parkway				M M	/	D	D / T	Y Y	Y	Y						
0.1	Suite 1400		7.0.1		08		31		201		_						
Cit	y :lanta	State GA	Zip Code 30339					: SA11A									
		0/1		_	Amoun	t of	⊢ach F	Receipt	inis Pe	eriod							
	C ID number of contributing leral political committee.	С								75.	00						
				R	i-wook			eduction									
Na	me of Employer	Occupation				., pe	~,u	24404011	Ψ20								
	entiva	Dir - HR															
Re	ceipt For:	Aggregate	Year-to-Date ▼														
	Primary General Other (specify)		450.00														
	Other (specify)		7 7														
					_				_	_							
SUB	TOTAL of Receipts This Page (optional)						-			450.0	0						
	,		· · ·	- i			,										
тоти	AL This Period (last page this line number	only)	••••••				,				_						

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 18 OF

Atlanta     GA     30339       FEC ID number of contributing federal political committee.     C     Image: Committee comm	ributions from such committee.
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC         Full Name (Last, First, Middle Initial)         Matthew Haglund         Mailing Address 3350 Riverwood Parkway         Suite 1400         City       State         Atlanta       GA         FEC ID number of contributing federal political committee.       Cupation         Name of Employer       Occupation         Gentiva Health Services       AVP - Sales	1     1     2014       2014     2014       1     2014       1     2014       1     2014       1     2014       1     2014
A. Matthew Haglund       Date of F         Mailing Address 3350 Riverwood Parkway       Image: Constraint of Constraint for the constraint of Constraint for the const	1     1     2014       2014     2014       1     2014       1     2014       1     1       1     1       1     1       2     1       1     1       2     1       1     1       2     1       1     1       2     1       1     1       2     1       1     1
Suite 1400     08       City     State     Zip Code       Atlanta     GA     30339       FEC ID number of contributing federal political committee.     C       Name of Employer     Occupation       Gentiva Health Services     AVP - Sales	31   2014     ction ID : SA11AI.11820     of Each Receipt this Period
FEC ID number of contributing federal political committee.     C     Bi-weekly       Name of Employer     Occupation     Bi-weekly       Gentiva Health Services     AVP - Sales	
federal political committee.     Image: Committee	60.00
Gentiva Health Services     AVP - Sales	/y /y /w
Pagaint For:	payroll deduction - \$20
Receipt For:	
Aggregate Teat-to-Date V	
Primary     General       Other (specify) ▼     220.00	
Full Name (Last, First, Middle Initial)       Date of F         B. Joley Hine       Date of F	Receipt
Mailing Address 3350 Riverwood Pkwy Suite 1400 08	/ D D / Y Y Y Y Y 31 2014
0.1	ction ID : SA11AI.11828
	of Each Receipt this Period
FEC ID number of contributing federal political committee.	90.00
Name of Employer     Occupation     Bi-weekly pressure       Gentiva     Area Director - Operations     Director - Operations	payroll deduction - \$30
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       540.00	
Full Name (Last, First, Middle Initial) C. Jackie Hughes Date of F	Receipt
Mailing Address 3350 Riverwood Parkway Suite 1400	/ D D / Y Y Y Y 31 2014
	ction ID : SA11AI.11830 of Each Receipt this Period
FEC ID number of contributing federal political committee.	60.00
Name of Employer Occupation BI-weekly	payroll deduction - \$20
Gentiva Health Services AVP - Finance	
Receipt For:     Aggregate Year-to-Date ▼       Primary     General	
Other (specify) ▼ 220.00	
SUBTOTAL of Receipts This Page (optional)	

## 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

			Detailed Summary Page		11a 13		11b   14	)  -	11c		12 16	17
Ar	y information copied from such Reports and	Statements ma	l ay not be sold or used by any p	erson f	or the	pur	pose	e of	15 soliciting	g con	tributi	0ns
or	for commercial purposes, other than using the	ne name and a	ddress of any political committee	e to sol	icit co	ntrib	outio	ns f	rom suc	h con	nmitte	e.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE	S INC PAC	C GENTIVAPAC									
A.	Full Name (Last, First, Middle Initial) Lisa Jans			[	Date o	f Re	eceip	ot				
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м – м 08	1	D	31	/ Y	Y 20	ү 14	Y
	City	State GA	Zip Code 30339						SA11AI.			
	Atlanta	GA	30339	A	Amoun	t of	Eac	h R	eceipt th	is Pe	eriod	_
	FEC ID number of contributing federal political committee.	С					7			¢4 r	45.0	00
	Name of Employer	Occupation		В	I-weeк	iy pa	ayro	li de	duction -	• \$15		
	Gentiva	Area Rehat	Director									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		270.00									
В.	Full Name (Last, First, Middle Initial) Andrew Johnson	1			Date o	f Re	eceip	ot				
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	1	D	31	/ Y	201	Y 4	Y
	City	State	Zip Code		Trans	acti	ion I	D : :	SA11AI.	1183	2	_
	Atlanta	GA	30339	A	Amoun	t of	Eac	h R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,		,	_	90.0	00
	Name of Employer	Occupation		— Bi	-weekl	y pa	ayrol	l deo	duction -	\$30		
	Gentiva	AVP - Sales										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00	]								
<u>с.</u>	Full Name (Last, First, Middle Initial) Dean Johnson				Date o	f Re	eceip	ot				
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	D	31	/ Y	201	Y 14	Y
	City Atlanta	State GA	Zip Code 30339						SA11AI			
		0/1	30335	_	Amoun	t of	Eac	h R	eceipt th	nis Pe	eriod	_
	FEC ID number of contributing federal political committee.	С			i wook	- lv pr	7	ll do	duction -	\$10	300.0	00
	Name of Employer	Occupation			I-week	iy pa	ayro	ii ue	auction	- 3100	J	
	Gentiva	Division VP	- Sales									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		1800.00									
	UBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·		_		7		7	-	435.0	0

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 20 OF

			Detailed Summary Page		11a 13		11b 14	11c		12 16	17						
	y information copied from such Reports and for commercial purposes, other than using the				or the		pose of	soliciting		ntribut	ions						
$\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	GENTIVAPAC														
A.	Full Name (Last, First, Middle Initial) Debbie Ann Kearns				Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		м м 08		31	J L	20	)14	Y						
	Atlanta	GA	30339					SA11AI. eceipt th									
	FEC ID number of contributing federal political committee.	С					5			90.	00						
	Name of Employer Gentiva	Occupation AVP - Sales		— B	i-weekl	y pa	ayroll de	duction ·	- \$30	)							
	Receipt For:	1	Year-to-Date ▼														
	Primary General Other (specify) ▼		540.00														
В.	Full Name (Last, First, Middle Initial) Jennifer Kisluk	1			Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	31	/ Y	20	) 14	Y						
	City	State	Zip Code		Trans	acti	on ID :	SA11AI.	1183	37							
	Atlanta	GA	30339	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С					,	, ,		75.	00						
	Name of Employer Gentiva	Occupation Finance Dir		— B	i-weekly	y pa	yroll de	duction -	\$25								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00														
с.	Full Name (Last, First, Middle Initial) Rebecca Knight	1			Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	31	/ Y		)14	Y						
	City Atlanta	State GA	Zip Code 30339					SA11AI eceipt th									
	FEC ID number of contributing federal political committee.	С					7			150.	00						
	Name of Employer		E	si-weekl	y pa	ayroll de	duction										
	Gentiva	AVP - Oper	ations														
	Receipt For:	Aggregate	Year-to-Date 🔻														
	Primary General Other (specify) ▼		720.00														
	UBTOTAL of Receipts This Page (optional)					7			315.0	00							

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 21 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		✓ 11a 13		11b 14	11c		12 16	17					
	y information copied from such Reports and S for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	INC PAC	C GENTIVAPAC													
Α.	Full Name (Last, First, Middle Initial) Mary Kramme				Date o	f Re	ceipt									
	Mailing Address 3350 Riverwood Parkway Suite 1400 City	State	Zip Code		08		31	SA11A	20	)14	Y					
	Atlanta	GA	30339					SATTA Receipt 1								
	FEC ID number of contributing federal political committee.	С					1	1000.pt			.00					
	Name of Employer	Occupation			Payroll deduction - \$25											
	Gentiva Health Services	AVP - Oper	ations													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		400.00													
в.	Full Name (Last, First, Middle Initial) George Ledbetter				Date o	f Re	ceipt									
	Mailing Address 3350 Riverwood Parkway Suite 1400				08	/	31		20	ү 14	Y					
	City	State	Zip Code					SA11A	-	-						
	Atlanta	GA	30339		Amoun	t of	Each F	Receipt 1	his P	eriod	_					
	FEC ID number of contributing federal political committee.	С			L			7		100	.00					
	Name of Employer Gentiva Health Services	Occupation Director - M	anaged Care		Payroll deduction - \$50											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00													
<u> </u>	Full Name (Last, First, Middle Initial) Deanna Lewis				Date o	f Re	ceipt									
	Mailing Address 3350 Riverwood Parkway Suite 1400				08	1	31		20	ү 14	Y					
	City Atlanta	State GA	Zip Code 30339					SA11A								
		0A	30339		Amoun	t of	Each F	Receipt 1	his P	eriod						
	FEC ID number of contributing federal political committee.	С			Bi-wook		, avroll de	eduction	_	100	.00					
	Name of Employer	Occupation			DI-Weer	ay pe	ayron ut	Suuction								
	Gentiva Health Services Receipt For:		or - Operations													
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00	)												
s	UBTOTAL of Receipts This Page (optional)			▶	<u> </u>		7		-	250	00					
Т	OTAL This Period (last page this line number	only)		🕨												

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 22 OF

			Detailed Summary Page		(11a 13		11b 14		11c 15	$\square$	12 16	47					
	y information copied from such Reports and for commercial purposes, other than using the				for the		oose of		liciting		ntribut						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE																
A.	Full Name (Last, First, Middle Initial) Christopher Macinnis				Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		м м 08		31			20	)14	Y					
	Atlanta	GA	30339	_	Amount		i <b>on ID</b> : Each F										
	FEC ID number of contributing federal political committee.	С					, .		7	<b>.</b>	180.						
	Name of Employer	Occupation			3i-weekl	у ра	ayroll de	edu	iction -	\$60	)						
	Gentiva Receipt For:	RVP - Oper	Year-to-Date ▼														
	Primary General Other (specify) ▼	Aggregate	1080.00														
В.	Full Name (Last, First, Middle Initial) Rosa Mascardi				Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400				08	/	31		/ Y	20		Y					
	City Atlanta	State GA	Zip Code 30339	Transaction ID : SA11AI.11843           Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С				. 01	1	100	,		75.	00					
	Name of Employer Gentiva	Occupation AVP - Sales		B	i-weekl	y pa	iyroll de	edu	ction - S	\$25							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00														
с.	Full Name (Last, First, Middle Initial) Michelle Mazzonetto				Date of	Re	ceipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	1	D 31		/ Y		) 14	Y					
	City Atlanta	State GA	Zip Code 30339	-	Trans Amount		i <mark>on ID</mark> : Each F										
	FEC ID number of contributing federal political committee.	С					,	1	7		60.	00					
	Name of Employer	Occupation			Bi-week	iy pa	ayroll d	eau	iction -	\$20	)						
	Gentiva Receipt For:	AVP - Oper															
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00														
s	UBTOTAL of Receipts This Page (optional)			•			7	l	7		315.	00					
т	OTAL This Period (last page this line numbe	er only)		<b>-</b>													

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 23 OF

		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than using the			person for the purpose of soliciting contributions see to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE	S INC PAC	C GENTIVAPAC	
Full Name (Last, First, Middle Initial)         Russ McDonough         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify) ▼		Zip Code 30339 n nation Officer Year-to-Date ▼ 1800.00	Date of Receipt
Full Name (Last, First, Middle Initial)         B. Cassie Mitchell         Mailing Address 3350 Riverwood Parkway         City         Atlanta         FEC ID number of contributing federal political committee.         Name of Employer         Gentiva Health Services         Receipt For:         Primary       General         Other (specify) ▼	State GA C Occupation AVP - Oper Aggregate		Date of Receipt
Full Name (Last, First, Middle Initial)         C. Cynthia Monk         Mailing Address 3350 Riverwood Parkway         Suite 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva Health Services         Receipt For:         Primary       General         Other (specify)		Zip Code 30339 Juman Resources Year-to-Date ▼ 550.00	Date of Receipt          Mark       / 2014         Transaction ID : SA11AI.11848         Amount of Each Receipt this Period         Isi-weekly payroll deduction - \$50
SUBTOTAL of Receipts This Page (optional)			

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 24 OF

•			Detailed Summary Page	×	-		11b		1c	12		'			
An	y information copied from such Reports and S	tatements ma	V not be sold or used by any pe	rson f	13 or the		14 Dose o	of solid		16 contribu	tione	17			
	for commercial purposes, other than using the														
$\left \right\rangle$	NAME OF COMMITTEE (IN Full) GENTIVA HEALTH SERVICES	INC PAC	GENTIVAPAC			_									
	Full Name (Last, First, Middle Initial) Mary Muchow				Date of	Ree	ceipt								
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	]′	31	_	Y	y y 2014	Y				
	City	State	Zip Code		Trans	acti			1AI.1						
	Atlanta	GA	30339	A	Amount	tof	Each	Recei	pt this	s Period		_			
	FEC ID number of contributing federal political committee.	С					7		,		0.00				
	Name of Employer	Occupation		— В.	i-weekl	ly pa	ayroll d	reduct	ion - {	\$30					
	Gentiva Health Services Inc.	Director Fiel	Id Audit												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 540.00												
	Full Name (Last, First, Middle Initial) Margo Nemet				Date of	Ree	ceipt								
	Mailing Address 3350 Riverwood Pkwy Ste 1400				M M 08		31	_	Y	2014	Y				
	City	State	Zip Code	Transaction ID : SA11AI.11855											
	Atlanta	GA	30339	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		45.00											
	Name of Employer Gentiva Health Services Inc.	Occupation Director Cor	n mpliance Services												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00												
с.	Full Name (Last, First, Middle Initial) Derek Nordman				Date of	Ree	ceipt								
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	31		Y	2014	Y				
	City Atlanta	State GA	Zip Code 30339		Trans										
			JUJJJJ		4mount	t of	Each 1	Recei	pt this	s Period	l	_			
	FEC ID number of contributing federal political committee.	С			si-weekl	V DC	JUroll d	leduct	ion (		0.00				
	Name of Employer	Occupation			. week	y Pč	UI U	เวินินินิ		~ <b>-</b> V					
	Gentiva	Dir - Region													
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify)		360.00												
s	UBTOTAL of Receipts This Page (optional)		•••••			Ξ	,		,	195	.00				
т	OTAL This Period (last page this line number of	only)		.											

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 25 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17										
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	C GENTIVAPAC											
Α.	Full Name (Last, First, Middle Initial) Laurie O'Hara Mailing Address 3350 Riverwood Pkwy			Date of Receipt										
	City Ste 1400	State	Zip Code	08 31 2014 Transaction ID : SA11AI.11859										
	Atlanta	GA	30339	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		60.00										
	Name of Employer Gentiva	Occupation AVP - Sales		Bi-weekly payroll deduction - \$20										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00											
в.	Full Name (Last, First, Middle Initial) Charlotte Parker			Date of Receipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City													
	Atlanta	GA	30339	Transaction ID : SA11AI.11860 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		60.00										
	Name of Employer Gentiva	Occupation AVP - Hosp		Bi-weekly payroll deduction - \$20										
	Receipt For: Primary General Other (specify) ▼	eceipt For: Primary General Aggregate Year-to-Date ▼												
<u> </u>	Full Name (Last, First, Middle Initial) Benjamin Peirce			Date of Receipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400	01.1		08 / D D / Y Y Y Y Y 2014										
	City Atlanta	State GA	Zip Code 30339	Transaction ID : SA11AI.11861 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		120.00										
	Name of Employer	Occupation	1	Bi-weekly payroll deduction - \$40										
	Gentiva Health Services Inc.	Manager W	/ound Care											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00											
s	UBTOTAL of Receipts This Page (optional)			240.00										
т	OTAL 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 OF

			Detailed Summary Page		11a 13		11b 14	_  -	11c 15		2 16	17										
	y information copied from such Reports and S for commercial purposes, other than using the																					
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	INC PAC	CGENTIVAPAC																			
A.	Full Name (Last, First, Middle Initial) Jerrold Perchik				Date of	f Re	eceip	t														
	Mailing Address 3350 Riverwood Pkwy Suite 1400 City	State	Zip Code		08 31 2014 Transaction ID : SA11AI.11862																	
	Atlanta	GA	30339						eceipt th													
	FEC ID number of contributing federal political committee.	С			150.00 Bi-weekly payroll deduction - \$50																	
	Name of Employer	Occupation		B	i-week	ly pa	ayrol	l dec	duction -	\$50												
	Gentiva Receipt For:		Gen Counsel	_																		
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 900.00																			
в.	Full Name (Last, First, Middle Initial) Leland Pierce				Date of	f Re	eceip	t														
	Mailing Address 3350 Riverwood Pkwy Ste 1400											08 31 2014 Transaction ID : SA11AI.11863										
	City Atlanta																					
	FEC ID number of contributing federal political committee.		Amoun		Eac	1 He	eceipt th	IS Pe	90.	00												
	Name of Employer Gentiva	Occupation Area Rehat		— Bi	— Bi-weekly payroll deduction - \$30																	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 540.00																			
с.	Full Name (Last, First, Middle Initial) Perry Pruett				Date of	f Re	eceip	t														
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	D	а 31	/ Y	y 201		Y										
	City Atlanta	State GA	Zip Code 30339						SA11AI. eceipt th													
	FEC ID number of contributing federal political committee.	С					,				210.	00										
	Name of Employer	Occupation	1	В	i-week	ly pa	ayrol	l de	duction -	\$70												
	Gentiva	Div VP - Inf	formation Technology																			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼																			
	Other (specify)		1260.00	2.00																		
$\vdash$	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			•		-	7				450.0	00										

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 27 OF

	EMIZED RECEIPTS	for each category of the Detailed Summary Page		11a 13		1b 4	11c 15	12 16	17						
	y information copied from such Reports and s for commercial purposes, other than using the														
$\Big\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES		C GENTIVAPAC												
Α.	Full Name (Last, First, Middle Initial) Andrew Rauch				Date of Receipt										
	Mailing Address 3350 Riverwood Pkwy Ste 1400 City	State	Zip Code		08 31 2014 Transaction ID : SA11AI.11866										
	Atlanta	GA	30339		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C			90.00										
	Name of Employer	Occupation	1	E	3i-weekl	ly pay	roll ded	uction -	\$30						
	Gentiva	Financial A	nalyst Reg - Sr												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)		, 540.00												
В.	Full Name (Last, First, Middle Initial) Mary Jo Rinkewich				Date of	f Rece	eipt								
	Mailing Address 3350 Riverwood Pkwy Ste 1400		м м 08	/	D D D 31	/ Y	2014	Y							
	City	State	Zip Code				n ID : S								
	Atlanta	GA	30339		Amount	t of E	ach Re	ceipt th	is Perio	d					
	FEC ID number of contributing federal political committee.	ů – L								0.00					
	Name of Employer Gentiva	Occupation AVP - Sales		B	i-weekly	y payr	oll dedi	uction -	\$20						
	Receipt For: Primary General Other (specify) ▼														
<u>с</u> .	Full Name (Last, First, Middle Initial) Julee Rose				Date of	f Rece	eipt								
	Mailing Address 3350 Riverwood Pkwy Ste 1400	-			м м 08	/	D D 31	/ Y	ү ү 2014	Y					
	City Atlanta	State GA	Zip Code 30339				<u>n ID : S</u> ach Re		11871 is Perio	d					
	FEC ID number of contributing federal political committee.	С				,				5.00					
	Name of Employer	Occupation	1	E	Bi-weekl	ly pay	roll ded	uction -	\$15						
	Gentiva Health Services Inc.	Area Direct	tor												
	Receipt For:														
	Other (specify)														
	UBTOTAL of Receipts This Page (optional)					. ,		7	19	5.00					
	<b>OTAL</b> This Period (last page this line number	only)		• 🕨	- 1 m										

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 28 OF

		Detailed Summary Page		11a		11b	11c	12					
				13		14	15	16	17				
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma	y not be sold or used by any p ddress of any political committe	erson fo	or the	purp htrib	pose of s	soliciting	contribu	tions ee.				
NAME OF COMMITTEE (In Full)	ing the nume and a		0 10 001										
	CES INC PAC	GENTIVAPAC											
Full Name (Last, First, Middle Initial)							_						
Nancy Sciortino				ate of	Re	ceipt							
Mailing Address 3350 Riverwood Parkw	/ay		- F	M M	/	DD	/ Y	YYY	Υ				
Suite 1400 City	State	Zip Code	-  L	08 Trans	204	31		2014					
Atlanta	GA	30339		Transaction ID : SA11AI.11873         Amount of Each Receipt this Period									
FEC ID number of contributing													
federal political committee.	С			40.00									
			— Bi	Bi-weekly payroll deduction									
Name of Employer	Occupation	ationa				-							
Gentiva Health Services Receipt For:	AVP - Opera		_										
Primary General	Aggregate	Year-to-Date ▼											
Other (specify) ▼		320.00											
Full Name (Last, First, Middle Initial)													
3. Todd Sexe				ate of	Re	ceipt							
Mailing Address 3350 Riverwood Pkwy	11	м = м 08	/	31	/ Y	2014	Υ						
Ste 1400	City State Zip Code												
Atlanta	GA	30339				on ID : S Each Re		is Period					
FEC ID number of contributing						300	-						
federal political committee.	ů l												
Name of Employer	Bi-	weekl	y pa	yroll ded	uction -	\$100							
Gentiva Health Services Inc.	Occupation VP Home H	ealth Operations											
Receipt For:		Year-to-Date ▼											
Primary General	Aygregale		-										
Other (specify)		, 1800.00											
			_										
Full Name (Last, First, Middle Initial)				ate of	Po								
Mailing Address 3350 Riverwood Pkwy					пе								
Ste 1400				м м 08		31	/ Y	2014	Y				
City	State	Zip Code		Trans	acti	ion ID : S	SA11AI.	11876					
Atlanta	GA	30339	A	mount	t of	Each Re	ceipt th	is Period					
FEC ID number of contributing	С		1.1					300	00				
federal political committee.	U					7	,						
Name of Employer	Occupation		Bi	-week	ly pa	ayroll dec	luction -	\$100					
Gentiva	Division VP	of Operations											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General		1000.00	11										
Other (specify)		1800.00											
CURTOTAL of Possinto This Page (antis	nal)		. [					640	00				
SUBTOTAL of Receipts This Page (optio	11al)			-		7	9						
TOTAL This Period (last page this line n	umber only)					-	-						
	,,		-	-		7							

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 29 OF

		Detailed Summary Page		11a	$\mid \mid$	11b		1c	12	<u> </u>		
Any information copied from such Reports and								citing				
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			e to sol	icit cor	ntrib	outions	s from	such	committ	ee.		
/ Full Name (Last, First, Middle Initial) <b>4. Paula Shoemaker</b>			Date of Receipt									
Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08		3 <sup>.</sup>		Y	y y 2014	Y		
City	State	Zip Code					: SA1		1878			
Atlanta	GA	30339	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		120.00 Bi-weekly payroll deduction - \$40									
Name of Employer	Occupation		Bi	-weekl	iy pa	ayroll (	ueducti	ion - S	<b></b> 40			
Gentiva	VP - Sales	Support & Marketing										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	]									
Full Name (Last, First, Middle Initial) <b>3.</b> Susan P Smith	·			Date of	<sup>:</sup> Re	ceipt						
Mailing Address 3350 Riverwood Parkway Suite 1400	_	08 31 2014										
City												
Atlanta	Atlanta GA 30339											
FEC ID number of contributing federal political committee.	С			_	_	7		,	255	.00		
Name of Employer Gentiva Health Services	Occupation VP Clinical I	Practice & Research	Bi	-weekly	у ра	ayroll d	deductio	on - \$	\$85			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1530.00	]									
Full Name (Last, First, Middle Initial) C. Paul Stein	. <u> </u>			Date of	<sup>:</sup> Re	ceipt						
Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08		3		Y	y y 2014	Y		
City Atlanta	State GA	Zip Code 30339					: SA1					
Atlanta FEC ID number of contributing federal political committee.	C		A	Amount	t of	Each	Receiț	pt thi:	s Period 150			
			Bi	i-weekl	ly pa	ayroll o	deducti	ion - S	\$50			
Name of Employer Gentiva	Occupation VP - IS											
Gentiva Receipt For:		Year-to-Date ▼	$\neg$									
Primary General	Aggregate											
Other (specify)		900.00	1									
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number				-	-	<u>y</u>		7	525.	.00		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 30 OF

	for each category of th Detailed Summary Pag	
or for commercial purposes, other than using t		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE	S INC PAC GENTIVAPAC	
Full Name (Last, First, Middle Initial)         A. Harmon Strange         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing federal political committee.         Name of Employer         Gentiva Health Services Inc.         Receipt For:         Primary       General         Other (specify) ▼	State       Zip Code         GA       30339         C       Occupation         President & CEO         Aggregate Year-to-Date ▼         3461	Date of Receipt         08       31       2014         Transaction ID : SA11AI.11882         Amount of Each Receipt this Period         576.90         Bi-weekly payroll deduction - \$192.30
Full Name (Last, First, Middle Initial)         B.       Timothy Swann         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify)	State       Zip Code         GA       30339         C       Occupation         Area Director Sales       Aggregate Year-to-Date ▼         Aggregate Year-to-Date ▼       720.	Date of Receipt 08 31 2014 Transaction ID : SA11AI.11885 Amount of Each Receipt this Period 120.00 Bi-weekly payroll deduction - \$40
Full Name (Last, First, Middle Initial)         Trevor Sylvestre         Mailing Address 3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify)	State       Zip Code         GA       30339         C       Occupation         Director - Finance       Aggregate Year-to-Date ▼         630	Date of Receipt 08 / 31 / 2014 Transaction ID : SA11AI.11886 Amount of Each Receipt this Period 105.00 Bi-weekly payroll deduction - \$35
SUBTOTAL of Receipts This Page (optional).		

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 31 OF

		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and S or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC	C GENTIVAPAC									
✓       Full Name (Last, First, Middle Initial)         A.       Linda Trelstad         Mailing Address 3350 Riverwood Pkwy         Suite 1400         City         Atlanta         FEC ID number of contributing federal political committee.         Name of Employer         Gentiva         Receipt For:         Primary       General         Other (specify) ▼	Linda Trelstad         Mailing Address 3350 Riverwood Pkwy         Suite 1400         City       State       Zip Code         Atlanta       GA       30339         FEC ID number of contributing federal political committee.       C       C         Name of Employer       Occupation       Dir - FSU         Receipt For:       Aggregate Year-to-Date ▼         Primary       General										
B. Julie Vandre Mailing Address 3350 Riverwood Parkway Suite 1400	State	Zip Code	Date of Receipt								
Atlanta FEC ID number of contributing federal political committee. Name of Employer Gentiva Health Services	GA Occupation AVP - Oper	Amount of Each Receipt this Period 50.00 Bi-weekly payroll deduction									
Receipt For: Primary General Other (specify) ▼	Receipt For:     Aggregate Year-to-Date ▼       Primary     General										
Full Name (Last, First, Middle Initial)         C.       Gena Wagner         Mailing Address       3350 Riverwood Pkwy         Ste 1400         City         Atlanta         FEC ID number of contributing         federal political committee.         Name of Employer         Gentiva Health Services, Inc.         Receipt For:         Primary       General         Other (specify) ▼	State GA C Occupation AVP - Oper Aggregate		Date of Receipt								
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			245.00								

## 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 32 OF

			Detailed Summary Page	×	11a 13	$\vdash$	11b 14	11c	12 16	17						
	y information copied from such Reports and s for commercial purposes, other than using th				for the			soliciting	contribu	tions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES															
A.	Full Name (Last, First, Middle Initial) Virgel Ward				Date of	Rec	ceipt									
	Mailing Address 3350 Riverwood Parkway Suite 1400				M         M         /         D         D         /         Y											
	City Atlanta	State GA	Zip Code 30339		Transaction ID : SA11AI.11893 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			75.00											
	Name of Employer Gentiva Health Services, Inc.	Occupation Area Direct			3i-weekl	y pay	yroll de	eduction -	\$25							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	1												
в.	Full Name (Last, First, Middle Initial) Charlotte Weaver				Date of	Rec	ceipt									
	Mailing Address 3350 Riverwood Pkwy Ste 1400						08 / D D / Y Y Y Y 2014									
	City Atlanta	State GA	Zip Code 30339					SA11AI.1 Receipt thi								
	FEC ID number of contributing federal political committee.		150.00 Bi-weekly payroll deduction - \$50													
	Name of Employer Gentiva Health Services, Inc.	Occupation Chief Clinic		— B	i-weekly	y pay	roll de	duction - 3	\$50							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00													
с.	Full Name (Last, First, Middle Initial) Paul Weddle				Date of	Rec	ceipt									
	Mailing Address 3350 Riverwood Pkwy Ste 1400				м м 08	/	D D 31	/ Y	ү ү 2014	Y						
	City Atlanta	State GA	Zip Code 30339					SA11AL.								
	FEC ID number of contributing federal political committee.	С					,			5.00						
	Name of Employer	Occupation		E	Bi-weekly payroll deduction - \$15											
	Gentiva Receipt For:		Operations (Hosp)													
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	1												
s	UBTOTAL of Receipts This Page (optional)		•••••	•			,	7	270	.00						
т	OTAL This Period (last page this line number	only)														

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 33 OF

		Detailed Summary Page		11a 13		11b 14		11c 15	$\left  - \right $	12 16	17				
	y information copied from such Reports and S for commercial purposes, other than using the								liciting		ntributi	ions			
$\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	INC PAC	C GENTIVAPAC												
Α.	Full Name (Last, First, Middle Initial) Damien Weston Mailing Address 3350 Riverwood Pkwy				Date of		· ·	t D		V	Y	V			
	Ste 1400	State	Zip Code		08			31	411AI.	20	014	Y			
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period											
	Name of Employer Gentiva	Occupation AVP - Sales		Bi-weekly payroll deduction - \$75											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1350.00												
B.	Full Name (Last, First, Middle Initial) Melissa Wilbanks			(	Date of	Re	eceipt	t							
	Mailing Address 3350 Riverwood Pkwy Ste 1400		м м 08	/		31	/ Y	ү 20	)14	Y					
	City Atlanta		Trans Amount				A11AI.1								
	FEC ID number of contributing federal political committee.				J		7		75.	00					
	Name of Employer Gentiva	Occupation AVP - Sales		— Bi	<ul> <li>Bi-weekly payroll deduction - \$25</li> </ul>										
	Receipt For: Primary General Other (specify) ▼	Receipt For:     Aggregate Year-to-Date ▼       Primary     General													
C.	Full Name (Last, First, Middle Initial) Teresa Wiles				Date of	Re	eceipt	ot							
	Mailing Address 3350 Riverwood Parkway Suite 1400				м м 08	/		31		20	)14	Y			
	City Atlanta	State GA	Zip Code 30339		Trans				A11AI. ceipt th						
	FEC ID number of contributing federal political committee.	С					7		7		150.	00			
	Name of Employer	Occupation		B	i-week	ly pa	ayroll	ll dedu	uction -	\$50	)				
	Gentiva Health Services Receipt For:	Director - S	pecialties - Rehab												
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00												
s	UBTOTAL of Receipts This Page (optional)		••••••	•			7		7		450.0	00			
т	OTAL This Period (last page this line number	only)	•	•			7		7	_					

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 34 OF

	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
or for commercial purposes, other than us	and Statements may not be sold or used by any peing the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVI	CES INC PAC GENTIVAPAC										
Full Name (Last, First, Middle Initial) James Williamson		Date of Receipt									
Mailing Address 3350 Riverwood Parkw Suite 1400 City	State Zip Code	08 31 2014 Transaction ID : SA11AI.11902									
Atlanta	GA 30339	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C	210.00									
Name of Employer Gentiva	Occupation AVP - Risk Mgt.	Bi-weekly payroll deduction - \$70									
Receipt For:	Aggregate Year-to-Date ▼	_									
Other (specify)	1260.00										
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt									
Mailing Address											
City	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C										
Name of Employer	Occupation										
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼										
Full Name (Last, First, Middle Initial)		Date of Receipt									
Mailing Address											
City	State Zip Code	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C										
Name of Employer	Occupation	-									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼										
SUBTOTAL of Receipts This Page (optio	nal)	210.00									
TOTAL This Period (last page this line n	umber only)	10587.90									

S	CHEDULE B (FEC Form 3X)			F	OR	LINF	NU	MBER:				PAG	λE	35 C	)F :	38		
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the		hec	k only		e)		00		24		25		26		
			ummary Page			21b 27		22 28a		23 28b		24 28c		25 29		26 30b		
Ar or	y information copied from such Reports and Staten for commercial purposes, other than using the name	nents may no ne and addres	t be sold or use ss of any politic	ed by al cor	any nmit	persettee to	on f	for the licit cor	purı htrib	oose c utions	of so	liciting n such		ntribut mmitte	ions ee.			
$\backslash$	NAME OF COMMITTEE (In Full)			_														
	GENTIVA HEALTH SERVICES INC	C PAC G	ENTIVAPA	C														
~	Full Name (Last, First, Middle Initial)																	
А.	Bank of America							Date of		burse			Y	Y	Y			
	Mailing Address P O Box 15284							08		3				)14				
	City S Wilmington	State Zip Code DE 19850					Transaction ID : SB21B.12209											
	Purpose of Disbursement Bank Fees							Amount	of	Each	Disk	oursem	nent	this F	Perioc	ł		
	Candidate Name				egory/ 34 92													
	Office Sought: House Disbursen	nent For:		Т	ype					7		7						
	Senate	Primary Other (specif	General y) ▼															
	State: District:																	
В.	Full Name (Last, First, Middle Initial)						1	Date of	Dis	sburse	mer	ıt						
	Mailing Address							M M	/	D	D	/ Y	Y	Y	Y			
	City State Zip Code																	
	Purpose of Disbursement			-	-			٨٠٠٠٠٠	of	Tash	Diek		ont	thia [	Dorior	L		
	Candidate Name			Cat	000		Amount of Each Disbursement this Period											
					ype					7		7				4		
		nent For: Primary Other (specif	General y) ▼															
	State: District:		<i>,</i> , ,															
C.	Full Name (Last, First, Middle Initial)						I	Date of	Dis		-							
	Mailing Address							M = M	/	D	D	/ Y	Y	Y	Y			
	City	State	Zip Code															
	Purpose of Disbursement										<b>D</b> . 1							
	Candidate Name						Amount of Each Disbursement this Period											
		nent For: Primary Other (specif	General y) ▼		ype					,		- T						
_	State: District:																	
⊢	UBTOTAL of Disbursements This Page (optional)									7	_	7			.92 .92			
IΤ	OTAL This Period (last page this line number only)									7		7		54	52			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 36 OF 38									
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 27										
	ny information copied from such Reports and State for commercial purposes, other than using the nai													
$\square$	NAME OF COMMITTEE (In Full)													
$ \rangle$	GENTIVA HEALTH SERVICES IN	IC PAC	GENTIVAPA	C										
	Full Name (Last, First, Middle Initial)													
Α.	BECERRA FOR CONGRESS				Date of Disbursement									
	Mailing Address P.O. BOX 261060				08 25 2014									
	- 7	State	Zip Code		Transaction ID : SB23.11910									
	LOS ANGELES Purpose of Disbursement	CA	90026											
	Fulpose of Disbursement				Amount of Each Disbursement this Period									
	Candidate Name			Category/	1000.00									
				Туре	1000.00									
	Office Sought:     House     Disburse       Senate     President     Image: Constraint of the senate of the s	ment For: Primary Other (spe	X General											
	State: CA District: 34	1												
в.	Full Name (Last, First, Middle Initial)				Date of Disbursement									
	Mailing Address P.O. BOX 17813				08 14 2014									
	Maning Address P.O. BOX 17813				2014									
	City RICHMOND	State VA	Zip Code 23226		Transaction ID : SB23.11764									
	Purpose of Disbursement Stop payment on check #1369. Campaign never r	eceived che	ck & candidate	· · · · ·	Amount of Each Disbursement this Period									
	Candidate Name			Category/ Type	-5000.00									
	Senate President	ment For: Primary Other (spe	2014 X General cify) ▼											
	State:         VA         District:         07           Full Name (Last, First, Middle Initial)													
C.	HOYER FOR CONGRESS				Date of Disbursement									
	Mailing Address 700 13TH STREET, NW SUITE 600				08 04 2014									
	City WASHINGTON	State DC	Zip Code 20005		Transaction ID : SB23.11768									
	Purpose of Disbursement		20000											
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period 1000.00									
	Senate President	ment For: Primary Other (spe	K General											
_	State: MD District: 05													
s	<b>UBTOTAL</b> of Disbursements This Page (optional).			····· •	-3000.00									
T	OTAL This Period (last page this line number only	r)		••••••										

SCHEDULE B (FEC Form 3X)	<b>.</b>	FOR LINE I	NUMBER: PAGE 37 OF 3
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	r one)
	Detailed Summary Page	21b 27	22         X         23         24         25         2           28a         28b         28c         29         3
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
GENTIVA HEALTH SERVICES IN	C PAC GENTIVAPA	C	
Full Name (Last, First, Middle Initial) A. UDALL FOR COLORADO			Date of Disbursement
Mailing Address PO BOX 40158			08 04 2014
City DENVER	State Zip Code CO 80204		Transaction ID : SB23.11765
Purpose of Disbursement	00204		
-			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
	ment For: 2014	- '	
Senate President	Primary General Other (specify)		
State: CO District: 00			
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement
5.			
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			
Office Sought: House Disburse	ment For:	Туре	
Senate President	Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			Data of Dichursoment
С.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
			1000.00
SUBTOTAL of Disbursements This Page (optional)		•••••• •	
TOTAL This Period (last page this line number only	)	••••••	-2000.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 38 OF 38
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	27	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and State or for commercial purposes, other than using the na			on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
GENTIVA HEALTH SERVICES IN	NC PAC GENTIVAPA	C	
Full Name (Last, First, Middle Initial) A. Kim David for State Senate 2014			Date of Disbursement
Mailing Address			M         M         /         D         D         /         Y
City	State Zip Code OK		Transaction ID : SB29.11770
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2500.00
Office Sought: House Disburs Senate President	ement For: 2014 Primary X General Other (specify) ▼		
State: OK District: 18			
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name Category/ Type			
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		
			2500.00
SUBTOTAL of Disbursements This Page (optional)		····· •	2500.00
TOTAL This Period (last page this line number onl	y)		2500.00