



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="55216.67"/>	<input type="text" value="55216.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="72962.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7489.60"/>	<input type="text" value="65507.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="80451.84"/>	<input type="text" value="120723.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24538.70"/>	<input type="text" value="64810.53"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="55913.14"/>	<input type="text" value="55913.14"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6129.60	48156.30
(ii) Unitemized .....	1360.00	16850.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7489.60	65007.00
(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) .....	7489.60	65007.00
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	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7489.60	65507.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7489.60	65507.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	38.70	200.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	38.70	200.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	63500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1110.00
(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	1110.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24538.70	64810.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24538.70	64810.53

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7489.60	65007.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1110.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7489.60	63897.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	38.70	200.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	38.70	200.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
	<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**

Full Name (Last, First, Middle Initial) <b>A. Scott Allen</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8814</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. John Aurelio</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8675</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva Health Services Inc.	Occupation Regional VP Nursing Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. Camille Bagwell</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8676</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
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 ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Selece Beasley</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8678</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$20
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. Mara Benner</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8679</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 340.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$190
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 ▼ 1690.00	

Full Name (Last, First, Middle Initial) <b>C. Susan Benoit</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8680</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 60.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$30
Name of Employer Gentiva	Occupation RVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Cathy Blanchard</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8681</b>
Mailing Address 3 Huntington Quadrangle Suite 200S		Amount of Each Receipt this Period 80.00
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
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 ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>B. Shane Brinkerhoff</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8683</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>C. Stacy Bromell</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8684</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
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 ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> 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 9 OF 35
	<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. Adam Brooks**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Director - Regional Rehab

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8672**

Amount of Each Receipt this Period **70.00**

Bi-weekly payroll deduction \$35

**B. Robert Brunson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8685**

Amount of Each Receipt this Period **80.00**

Bi-weekly payroll deduction \$40

**c. John Camperlengo**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 33039

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

Name of Employer Gentiva Health Services, Inc. Occupation SVP, CCO & Deputy General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8686**

Amount of Each Receipt this Period **50.00**

Bi-weekly payroll deduction \$25

**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 10 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 3350 Riverwood Pkwy  
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Operations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8689**

Amount of Each Receipt this Period  
 200.00

Bi-weekly payroll deduction \$100

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

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 ▼  
 275.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8693**

Amount of Each Receipt this Period  
 50.00

Bi-weekly payroll deduction \$25

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

Mailing Address 3350 Riverwood Pkwy  
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8694**

Amount of Each Receipt this Period  
 50.00

Bi-weekly payroll deduction \$25

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Barbara Cundiff</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8695</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services Inc.	Occupation Area Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
		Bi-weekly payroll deduction \$25

Full Name (Last, First, Middle Initial) <b>B. Patrick Cunningham</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8696</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	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 ▼ 220.00	
		Bi-weekly payroll deduction \$20

Full Name (Last, First, Middle Initial) <b>C. David Cygan</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8697</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 76.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation VP - Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	
		Bi-weekly payroll deduction \$38

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.00
<b>TOTAL</b> 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 12 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Indy Edwards</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8705</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 140.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$70
Name of Employer Gentiva	Occupation AVP - Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Elkin</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8706</b>
Mailing Address 3350 Riverwood Pkwy		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva	Occupation AVP - Sales Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. Dave Gieringer</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8714</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 150.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$75
Name of Employer Gentiva Health Services Inc.	Occupation Vice President Acctg / Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> 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 13 OF 35
<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. Michael Grieco**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8716**

Amount of Each Receipt this Period **80.00**

Bi-weekly payroll deduction \$40

**B. Nancy Guerland**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8717**

Amount of Each Receipt this Period **80.00**

Bi-weekly payroll deduction \$40

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

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Regional Director - Clinical Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8719**

Amount of Each Receipt this Period **40.00**

Bi-weekly payroll deduction \$20

**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 14 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. John Hamilton**

Mailing Address 3350 Riverwood Pkwy  
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Compliance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8722**

Amount of Each Receipt this Period  
 100.00

Bi-weekly payroll deduction \$50

Full Name (Last, First, Middle Initial)  
**B. Teresa Harrell**

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 Regional Director - HR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8723**

Amount of Each Receipt this Period  
 60.00

Bi-weekly payroll deduction \$30

Full Name (Last, First, Middle Initial)  
**C. Jane Heideman**

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 - Accounting

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 495.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8725**

Amount of Each Receipt this Period  
 90.00

Bi-weekly payroll deduction \$45

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 15 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ann Hodges</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8728</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 60.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$30
Name of Employer Gentiva	Occupation HR Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>B. Monica Hullinger</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8729</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva 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 ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Hunt</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8730</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva	Occupation RVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> 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 16 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Dean Johnson</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8733</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00 Bi-weekly payroll deduction \$100
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	
Name of Employer Gentiva Occupation Division VP - Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

Full Name (Last, First, Middle Initial) <b>B. John Karr</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8735</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 125.00 Bi-weekly payroll deduction \$75
City Atlanta State GA Zip Code 30339	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 ▼ 575.00

Full Name (Last, First, Middle Initial) <b>C. Debbie Ann Kearns</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8736</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 60.00 Bi-weekly payroll deduction \$30
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	385.00
<b>TOTAL</b> 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 17 OF 35
	<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	<input type="checkbox"/> 17

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

**A. Jennifer Kisluk**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Finance Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 31 / 2012  
Transaction ID : SA11AI.8738

Amount of Each Receipt this Period  
50.00

Bi-weekly payroll deduction \$25

**B. Rebecca Knight**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
05 / 31 / 2012  
Transaction ID : SA11AI.8739

Amount of Each Receipt this Period  
80.00

Bi-weekly payroll deduction \$40

**C. Robert Koch**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 31 / 2012  
Transaction ID : SA11AI.8740

Amount of Each Receipt this Period  
50.00

Bi-weekly payroll deduction \$25

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

**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 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Robert Little</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8742</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva	Occupation RVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>B. Christopher Macinnis</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8743</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 120.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$60
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 ▼ 660.00	

Full Name (Last, First, Middle Initial) <b>C. Rosa Mascardi</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8745</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$20
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 ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<b>TOTAL</b> 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 OF 35 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Stephen Mikuls</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8753</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$20
Name of Employer Gentiva	Occupation VP - Regional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. Barbara Moyer</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8757</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 10.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$5
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 ▼ 235.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Muchow</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8759</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 60.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$30
Name of Employer Gentiva Health Services Inc.	Occupation Director Field Audit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Karen Negri</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8762</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. Michelle Newton</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8765</b>
Mailing Address 3350 Riverwood Pkwy Suite 1400		Amount of Each Receipt this Period 70.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25
Name of Employer Gentiva	Occupation AVP - Operations (Hosp)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) <b>C. Derek Nordman</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8766</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$20
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 ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Laurie O'Hara</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8767</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee.	C	
Name of Employer Gentiva	Occupation AVP - Sales	Bi-weekly payroll deduction \$20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. Charlotte Parker</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8768</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 40.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee.	C	
Name of Employer Gentiva	Occupation AVP - Hospice	Bi-weekly payroll deduction \$20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. Benjamin Peirce</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8769</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee.	C	
Name of Employer Gentiva Health Services Inc.	Occupation Manager Wound Care	Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 454.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> 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 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Benjamin Peirce</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8772</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 14.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$7
Name of Employer Gentiva Health Services Inc. Occupation Manager Wound Care	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00

Full Name (Last, First, Middle Initial) <b>B. Jerrold Perchik</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8770</b>
Mailing Address 3350 Riverwood Pkwy Suite 1400		Amount of Each Receipt this Period 100.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$50
Name of Employer Gentiva Occupation VP - Assoc Gen Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00

Full Name (Last, First, Middle Initial) <b>C. Patricia Phillips</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8771</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$40
Name of Employer Gentiva Occupation AVP - Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	194.00
<b>TOTAL</b> 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 23 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Samuel Proctor**

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 - Benefits & HR Svc Ctr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 440.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8774**

Amount of Each Receipt this Period  
 80.00

Bi-weekly payroll deduction \$40

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
 220.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8777**

Amount of Each Receipt this Period  
 40.00

Bi-weekly payroll deduction \$20

Full Name (Last, First, Middle Initial)  
**C. Mary Jo Rinkewich**

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 ▼  
 237.70

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8778**

Amount of Each Receipt this Period  
 40.00

Bi-weekly payroll deduction \$20

**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 24 OF 35  
(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. Todd Sexe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3350 Riverwood Pkwy  
 Ste 1400  
 City Atlanta State GA Zip Code 30339  
 Date of Receipt 05 / 31 / 2012  
**Transaction ID : SA11AI.8781**  
 Amount of Each Receipt this Period 80.00  
 Bi-weekly payroll deduction \$40  
 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 ▼ 440.00

**B. Kathleen Shanahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3350 Riverwood Pkwy  
 Ste 1400  
 City Atlanta State GA Zip Code 30339  
 Date of Receipt 05 / 31 / 2012  
**Transaction ID : SA11AI.8782**  
 Amount of Each Receipt this Period 50.00  
 Bi-weekly payroll deduction \$25  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Gentiva Occupation VP - Human Resources  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

**C. Jeff Shaner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3350 Riverwood Pkwy  
 Ste 1400  
 City Atlanta State GA Zip Code 30339  
 Date of Receipt 05 / 31 / 2012  
**Transaction ID : SA11AI.8783**  
 Amount of Each Receipt this Period 300.00  
 Bi-weekly payroll deduction \$150  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Gentiva Occupation Division VP of Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1650.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 430.00  
**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 25 OF 35
	<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. Paula Shoemaker**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Sales Support & Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8785**

Amount of Each Receipt this Period **80.00**

Bi-weekly payroll deduction \$40

**B. Eric Slusser**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8788**

Amount of Each Receipt this Period **200.00**

Bi-weekly payroll deduction \$100

**C. Frederick Spight**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Purchasing & Supply Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt **05 / 31 / 2012**

**Transaction ID : SA11AI.8789**

Amount of Each Receipt this Period **90.00**

Bi-weekly payroll deduction \$45

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>370.00</b>
<b>TOTAL</b> 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 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Paul Stein</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8790</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$50
Name of Employer Gentiva	Occupation VP - IS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B. Harmon Strange</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8791</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 384.60
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$192.30
Name of Employer Gentiva Health Services Inc.	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.30	

Full Name (Last, First, Middle Initial) <b>C. Timothy Swann</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.8793</b>
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 80.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$40
Name of Employer Gentiva	Occupation Area Director Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	564.60
<b>TOTAL</b> 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 27 OF 35  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 3350 Riverwood Pkwy  
 Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Director - Finance

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8794**

Amount of Each Receipt this Period  
 70.00

Bi-weekly payroll deduction \$35

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

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 ▼  
 560.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8801**

Amount of Each Receipt this Period  
 100.00

Bi-weekly payroll deduction \$50

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

Mailing Address 3350 Riverwood Pkwy  
 Ste 1400

City Atlanta State GA Zip Code 30339

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt  
 05 / 31 / 2012  
**Transaction ID : SA11AI.8802**

Amount of Each Receipt this Period  
 200.00

Bi-weekly payroll deduction \$100

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 35
<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. Damien Weston**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 31 / 2012  
**Transaction ID : SA11AI.8804**

Amount of Each Receipt this Period  
50.00

Bi-weekly payroll deduction \$25

**B. Cheryl White**  
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Area Director Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
05 / 31 / 2012  
**Transaction ID : SA11AI.8806**

Amount of Each Receipt this Period  
100.00

Bi-weekly payroll deduction \$50

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

Mailing Address 3350 Riverwood Pkwy  
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 31 / 2012  
**Transaction ID : SA11AI.8807**

Amount of Each Receipt this Period  
50.00

Bi-weekly payroll deduction \$25

**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 29 OF 35  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC**

Full Name (Last, First, Middle Initial)  
**A. 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 ▼  
550.00

Date of Receipt  
05 / 31 / 2012  
**Transaction ID : SA11AI.8811**

Amount of Each Receipt this Period  
100.00

Bi-weekly payroll deduction \$50

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6129.60

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

Mailing Address 3350 RIVERWOOD PKWY  
SUITE 1400

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Transaction ID : SB21B.8651

Amount of Each Disbursement this Period

38.70
-------

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

### C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

38.70
-------

38.70
-------

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. AMERICA'S LEADERSHIP PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

Candidate Name  
**DEBBIE MS STABENOW**

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB23.8663**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. BILL NELSON FOR U S SENATE**

Mailing Address 500 RED SAIL WAY

City SATELITE BEACH State FL Zip Code 32937

Purpose of Disbursement

Candidate Name  
**BILL NELSON**

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB23.8815**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FRIENDS FOR HARRY REID**

Mailing Address P.O. BOX 19163

City LAS VEGAS State NV Zip Code 89132

Purpose of Disbursement

Candidate Name  
**HARRY REID**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

**003**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB23.8816**

Amount of Each Disbursement this Period

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.8815

Check number 1252 for \$1,000 stop paid/voided on 05/24/2012.

Form/Schedule: SB23

Transaction ID: SB23.8816

Check number 1264 for \$5,000 stop paid/voided on 05/14/2012.



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAVE REICHERT**

Mailing Address PO BOX 2032

City ISSAQUAH State WA Zip Code 98027

Purpose of Disbursement

003

Candidate Name  
**DAVE REICHERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WA District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

Transaction ID : **SB23.8652**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAVE REICHERT**

Mailing Address PO BOX 2032

City ISSAQUAH State WA Zip Code 98027

Purpose of Disbursement

003

Candidate Name  
**DAVE REICHERT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WA District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2012

Transaction ID : **SB23.8660**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MAX BAUCUS**

Mailing Address PO BOX 586

City HELENA State MT Zip Code 59624

Purpose of Disbursement

003

Candidate Name  
**MAX BAUCUS**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2012

Transaction ID : **SB23.8669**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MAX BAUCUS**

Mailing Address PO BOX 586

City HELENA State MT Zip Code 59624

Purpose of Disbursement

003

Candidate Name

**MAX BAUCUS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2012

Transaction ID : **SB23.8670**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SEARCHLIGHT LEADERSHIP FUND**

Mailing Address 700 13TH STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

003

Candidate Name

**HARRY REID**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

Transaction ID : **SB23.8658**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. STABENOW FOR US SENATE**

Mailing Address P.O. BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement

003

Candidate Name

**DEBBIE MS STABENOW**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

Transaction ID : **SB23.8661**

Amount of Each Disbursement this Period

1500.00

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

11500.00

**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**

Full Name (Last, First, Middle Initial)

**A. VAN HOLLEN FOR CONGRESS**

Mailing Address 10537 St. Paul Street

City Kensington State MD Zip Code 20895

Purpose of Disbursement

003

Candidate Name

**CHRIS VAN HOLLEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : SB23.8666**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. VICTORY NOW PAC**

Mailing Address 10537 ST. PAUL ST.

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement

003

Candidate Name

**CHRIS VAN HOLLEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2012

**Transaction ID : SB23.8667**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. WYDEN FOR SENATE**

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement

003

Candidate Name

**RONALD L WYDEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2012

**Transaction ID : SB23.8655**

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

24500.00