

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

ADDRESS (number and street) 3 HUNTINGTON QUADRANGLE SUITE 200S MELVILLE NY 11747-4627

2. FEC IDENTIFICATION NUMBER C00407080 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 25 2008 through 12 31 2008

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

Type or Print Name of Treasurer John Potapchuk

Signature of Treasurer Electronically Filed by John Potapchuk Date 01 30 2009

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		26113.05
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	22836.28									
(c) Total Receipts (from Line 19) .....	4352.00	29457.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27188.28	55570.05								
7. Total Disbursements (from Line 31) .....	54.32	28436.09								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	27133.96	27133.96								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	4066.00	20714.00
(i) Itemized (use Schedule A) .....	286.00	8743.00
(ii) Unitemized .....	4352.00	29457.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4352.00	29457.00
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4352.00	29457.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4352.00	29457.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	54.32	136.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	54.32	136.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	28300.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	54.32	28436.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54.32	28436.09

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	4352.00	29457.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4352.00	29457.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	54.32	136.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	54.32	136.09

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

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
James Andrews

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services AVP - Financial Services Unit  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5409

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Regional VP Nursing Operations  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 390.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5410

Amount of Each Receipt this Period  
30.00

Payroll Deduction - \$15.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Branch Director  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 390.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5417

Amount of Each Receipt this Period  
30.00

Payroll Deduction - \$15.00  
Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mara Benner		Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S		M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5412
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer Gentiva Health Services Inc.		Occupation Vice President Government Affairs		Payroll Deduction - \$150.- 00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2150.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Brunson		Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S		M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5414
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		30.00	
Name of Employer Gentiva Health Services Inc.		Occupation AVP - Sales		Payroll Deduction - \$15.00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		390.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda Byler		Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S		M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5415
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		20.00	
Name of Employer Gentiva Health Services Inc.		Occupation Branch Director		Payroll Deduction - \$10.00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<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 8 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Bruce Carter

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5421

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Assistant Vice President Financial Ops  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 260.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5422

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Area Director  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 260.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.5423

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 16  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial) Douglas Dahlgard		Date of Receipt MM / DD / YYYY 12 / 19 / 2008
Mailing Address 3 Huntington Quadrangle Suite 200S		<b>Transaction ID:</b> SA11AI.5424
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva Health Services Inc.	Occupation Vice President Tax	Payroll Deduction - \$25.00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

**B.**

Full Name (Last, First, Middle Initial) Rexanne Domico		Date of Receipt MM / DD / YYYY 12 / 19 / 2008
Mailing Address 3 Huntington Quadrangle Suite 200S		<b>Transaction ID:</b> SA11AI.5425
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer Gentiva Health Services Inc.	Occupation VP Gentiva Consulting	Payroll Deduction - \$10.00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

**C.**

Full Name (Last, First, Middle Initial) Dave Gieringer		Date of Receipt MM / DD / YYYY 12 / 19 / 2008
Mailing Address 3 Huntington Quadrangle Suite 200S		<b>Transaction ID:</b> SA11AI.5428
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva Health Services Inc.	Occupation Vice President Acctg / Controller	Payroll Deduction - \$20.00 Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>110.00</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: PAGE 10 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Claire Gold

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Manager Therapy Practice  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5429

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5434

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services RVP Sales  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5435

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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

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

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Brenda Junior

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer: Gentiva Health Services Inc. Occupation: Branch Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 19 / 2008  
Transaction ID: SA11AI.5437  
Amount of Each Receipt this Period: 40.00  
Payroll Deduction - \$20.00 Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer: Gentiva Health Services Inc. Occupation: Branch Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 19 / 2008  
Transaction ID: SA11AI.5439  
Amount of Each Receipt this Period: 20.00  
Payroll Deduction - \$10.00 Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer: Gentiva Health Services Inc. Occupation: Asst General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt: 12 / 19 / 2008  
Transaction ID: SA11AI.5441  
Amount of Each Receipt this Period: 60.00  
Payroll Deduction - \$30.00 Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 120.00

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

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

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Daniel Locker

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Regional Vice President Sales  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1001.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2008

**Transaction ID:** SA11AI.5442

Amount of Each Receipt this Period  
77.00

Payroll Deduction - \$38.50  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2008

**Transaction ID:** SA11AI.5444

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

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

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2008

**Transaction ID:** SA11AI.5445

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 157.00

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

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

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Margo Nemet

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Director Compliance Services  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5446

Amount of Each Receipt this Period 24.00

Payroll Deduction - \$12.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Senior Vice President/General Counsel  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5448

Amount of Each Receipt this Period 120.00

Payroll Deduction - \$60.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services EVP & Chief Financial Officer  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.5449

Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2644.00

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Todd Sexe

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2008

**Transaction ID:** SA11AI.5452

Amount of Each Receipt this Period  
40.00

Payroll Deduction - \$20.00  
Biweekly

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

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services SVP - Human Resources  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2008

**Transaction ID:** SA11AI.5454

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

**C.** Full Name (Last, First, Middle Initial)  
Sue-Ellen Stuart

Mailing Address 3 Huntington Quadrangle  
Suite 200S

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
Gentiva Health Services Area Director  
Inc.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2008

**Transaction ID:** SA11AI.5457

Amount of Each Receipt this Period  
20.00

Payroll Deduction - \$10.00  
Biweekly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 16
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Deborah Thompson	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5459
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$15.00 Biweekly
	Name of Employer Occupation Gentiva Health Services Inc. Branch Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick Topp	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5460
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$10.00 Biweekly
	Name of Employer Occupation Gentiva Health Services Inc. Branch Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gena Wagner	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5462
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$15.00 Biweekly
	Name of Employer Occupation Gentiva Health Services, Inc. AVP - Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	80.00
<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 / 16
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathy Warmath	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5463
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$10.00 Biweekly
	Name of Employer: Gentiva Health Services Inc. Occupation: Branch Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charlotte Weaver	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5465
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$75.00 Biweekly
	Name of Employer: Gentiva Health Services, Inc. Occupation: Chief Clinical Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Young	Date of Receipt MM / DD / YYYY 12 / 19 / 2008
	Mailing Address 3 Huntington Quadrangle Suite 200S	<b>Transaction ID:</b> SA11AI.5469
	City State Zip Code Melville NY 11747	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction - \$10.00 Biweekly
	Name of Employer: Gentiva Health Services Inc. Occupation: RVP - Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	265.00
<b>TOTAL</b> This Period (last page this line number only) .....	4066.00