FEC FORM 3X	AN	ID DISB	OF REC SURSEM An Authorize	ENTS	ee	C	Office Use Only	
1. NAME OF COMMITTEE (in fi		FEC MAILING	L,	ample:If typing er the lines	ı, type			
	H SERVICES IN							
ADDRESS (number and	street)		QUADRANGLE					
Check if differ		UITE 200S						
than previousl reported. (AC	У I М					NY	11747 	
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		S	TATE	ZIPCODE 🔺	
C00407080			3. IS THIS REPOR		NEW (N) OR	X AME (A)	NDED	
 4. TYPE OF REPO (Choose One) (a) Quarterly Rep 		(b) Monthly Report Due On:	Feb 20 (M2 Mar 20 (M3		May 20 (M5) Jun 20 (M6)	Aug 20	Year Onl	ection ly) (M12)
July 15 Quarterly Coctober	Report(Q1) Report(Q2) 15 Report(Q3)	(c) 12-Day PRE -El Report	ection) Primary (12F Convention (Oct 20 General (12 Special (12	G) Runoff (
January 3 Quarterly	Report(YE)		Election on				in the State of	
Year Onl	on-election y) (MY)	(d) 30-Day Post -E Report	Election	General (300	G)	Runoff (30F	3) Special	(30S)
(TER)	on Report		Election on			· · · ·	in the State of	
5. Covering Period	07	01 2	006	through	09	30	2006	
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 T								
Signature of Treasurer	Electronically	/ Filed by Joh	n Potapchuk		Da	ate 04	09 2007	
NOTE : Submission of t	alse, erroneous	, or incomplete i	nformation may s	ubject the pers	on signing this	Report to the pe	enalties of 2 U.S.C 437g.	
Office Use Only							FEC FORM 3X (Rev. 02/2003)	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

F	eport Covering the Period: From:		To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1		26621.06
	(b) Cash on Hand at Begining of Reporting Period	26857.06	
	(c) Total Receipts (from Line 19)	8404.00	18140.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35261.06	44761.06
7.	Total Disbursements (from Line 31)	13000.00	22500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22261.06	22261.06
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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. 02/2003) Page 3 Write or Type Committee Name GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC 0^D1 3^D0 ^м М 07 D м м 09 D 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 7597.00 12511.00 (i) Itemized (use Schedule A) 807.00 5629.00 (ii) Unitemized (iii) TOTAL (add 8404.00 18140.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees (c) 0.00

8404.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

8404.00

8404.00

- (such as PACs) Total Contributions (add Lines (d)
- 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)
- Party Committees

13. All Loans Received

12. Transfers From Affiliated/Other

- 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)
- (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other Political Committees

17. Other Federal Receipts

- (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)
 - (b) Levin Funds (from Schedule H5)
 - (c) Total Transfer (add 18(a) and 18(b)).
- 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))
- 20. Total Federal Receipts (subtract Line 18(c) from Line 19)

- 0.00
- 18140.00

2006

- 0.00 0.00 0.00
- 0.00 0.00 0.00

	 	 	 0.00
			 0.00
		 	 0.00

	18140.00	

18140.00

DETAILED SUMMARY PAGE

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committees	13000.00	22500.00
4.	and Other Political Committees	0.00	0.00
5.	(use Schedule E) 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
	Loans Made Refunds of Contributions To:	0.00	0.00
о.	(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
9.	Other Disbursements	0.00	0.00
0.	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
1.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13000.00	22500.00
32.	Total Federal Disbursements		
۷.	(subtract Line 21(a)(ii) from Line 30(a)(ii)	10000.00	00500.00
	from Line 31)	13000.00	22500.00

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
III. Net Contributions/Operating Expenditures			
33.	Total Contributions (other than loans) from Line 11(d), page 3)	8404.00	18140.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	8404.00	18140.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 60 (check only one)			
			or each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
	y information copied from such Reports and Sta for commercial purposes, other than using the r						
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
A.	Full Name (Last, First, Middle Initial) Susan Allen	Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	07 / 07 / Y Y Y Y 007 / 07 / 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4464			
	<u>Melville</u>	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00			
	Name of Employer Gentiva Health Services	Occupation	ⁿ egional VP Operations	Biweekly			
	Inc. Receipt For:		e Year-to-Date V	-			
	Primary General Other (specify) ▼	0 0	280.00]			
в.	Full Name (Last, First, Middle Initial) Susan Allen			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S		07 / 21 / Y Y Y 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4499			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00			
	Name of Employer Gentiva Health Services	Occupation	ⁿ egional VP Operations	Biweekly			
	Inc. Receipt For:		e Year-to-Date V	-			
	Primary General Other (specify) ▼		300.00]			
 C.	Full Name (Last, First, Middle Initial) Susan Allen			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 08 04 2006			
	City Mahilla	State	Zip Code	Transaction ID: SA11A1.4500			
	Melville FEC ID number of contributing	NY	11747	Amount of Each Receipt this Period			
	federal political committee.	C		20.00 Payroll Deduction \$20.00			
	Name of Employer Gentiva Health Services Inc.		egional VP Operations	Biweekly			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00]			
s	UBTOTAL of Receipts This Page (optional)			60.00			
Т	OTAL This Period (last page this line number o	nly)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/60				
			or each category of the	(check only one)				
			Detailed Summary Page	X 11a 11b 11c 12				
				13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
Ν	NAME OF COMMITTEE (In Full)							
\rangle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC					
Α.	Full Name (Last, First, Middle Initial) Susan Allen	Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y						
	City	State	Zip Code	Transaction ID: SA11A1.4501				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		40.00				
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$20.00 Biweekly				
	Inc. Receipt For:		egional VP Operations e Year-to-Date ▼	_				
	Primary General	Ayyreyale						
	Other (specify)							
в.	Full Name (Last, First, Middle Initial) Susan Allen			Date of Receipt				
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D Y						
	City	State	Zip Code	Transaction ID: SA11A1.4502				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		20.00				
	Name of Employer Gentiva Health Services	Occupation	n egional VP Operations	Payroll Deduction \$20.00 Biweekly				
	Inc. Receipt For:		e Year-to-Date V	_				
	Primary General	riggrogato		1				
	Other (specify)	380.00						
с.	Full Name (Last, First, Middle Initial) Susan Allen			Date of Receipt				
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y Y Y Y 09 29 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4504				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		20.00				
	Name of Employer Gentiva Health Services Inc.	Occupation Senior Re	n egional VP Operations	Payroll Deduction \$20.00 Biweekly				
	Receipt For:	-	e Year-to-Date ▼	—				
	Primary General Other (specify) ▼]						
s	UBTOTAL of Receipts This Page (optional)			80.00				
т	OTAL This Period (last page this line number o	nly)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 8 / 60 (check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
\sum	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC			
Α.	Full Name (Last, First, Middle Initial) James Andrews	Date of Receipt				
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		07 / D D / Y Y Y Y 07 07 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4465		
	Melville	NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		15.00		
	Name of Employer Gentiva Health Services	Occupation	n nancial Services Unit	Payroll Dedcution \$15.00 Biweekly		
	Inc. Receipt For:		Year-to-Date ▼	_		
	Primary General			1		
	Other (specify)	0 0	210.00			
в.	Full Name (Last, First, Middle Initial) James Andrews			Date of Receipt		
	Mailing Address 3 Huntington Quadrangl Suite 200S	M M / D D / Y				
	City	State	Zip Code	Transaction ID: SA11A1.4505		
	Melville	NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		15.00		
	Name of Employer Gentiva Health Services	Occupation	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly		
	Inc. Receipt For:		Paricial Services Unit			
	Primary General			1		
	Other (specify)	0 0	225.00			
с.	Full Name (Last, First, Middle Initial) James Andrews			Date of Receipt		
	Mailing Address 3 Huntington Quadrangl Suite 200S	e		M M / D D / Y		
	City	State	Zip Code	Transaction ID: SA11A1.4506		
	Melville	NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		15.00		
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Fir	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly		
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	240.00]		
s	UBTOTAL of Receipts This Page (optional)			45.00		
_T	OTAL This Period (last page this line number or	וy)		-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 60				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
			Detailed Summary Page					
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
	NAME OF COMMITTEE (In Full)							
\rangle	GENTIVA HEALTH SERVICES INC PA							
Α.	Full Name (Last, First, Middle Initial) James Andrews	Date of Receipt						
	Mailing Address 3 Huntington Quadrangl Suite 200S	08 / D D / Y Y Y Y 18 2006						
	City	State	Zip Code	Transaction ID: SA11A1.4507				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		15.00				
	Name of Employer Gentiva Health Services	Occupation	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly				
	Inc. Receipt For:		Year-to-Date V	_				
	Primary General		255.00	1				
	Other (specify)	0 0						
в.	Full Name (Last, First, Middle Initial) James Andrews			Date of Receipt				
	Mailing Address 3 Huntington Quadrangl Suite 200S	09 / D D / Y Y Y Y 001 / 2006						
	City	State	Zip Code	Transaction ID: SA11A1.4508				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		15.00				
	Name of Employer Gentiva Health Services	Occupation	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly				
	Inc. Receipt For:		Year-to-Date V	_				
	Primary General		270.00	1				
	Other (specify)	270.00						
C.	Full Name (Last, First, Middle Initial) James Andrews			Date of Receipt				
	Mailing Address 3 Huntington Quadrangl Suite 200S	e		M M / D D / Y Y Y Y 09 / 15 / 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4509				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		15.00				
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Fir	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly				
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify)		285.00	1				
_		0.0						
s	UBTOTAL of Receipts This Page (optional)			45.00				
Т	OTAL This Period (last page this line number or	nly)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 10 / 60 (check only one)		
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC			
L	Full Name (Last, First, Middle Initial)			1		
Α.	James Andrews	Date of Receipt				
	Mailing Address 3 Huntington Quadrangl Suite 200S	09 / 29 / Y Y Y Y 09 / 29 / 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4510		
	Melville	NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		15.00		
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Fir	n nancial Services Unit	Payroll Deduction \$15.00 Biweekly		
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	300.00]		
в.	Full Name (Last, First, Middle Initial) John Aurelio			Date of Receipt		
	Mailing Address 3 Huntington Quadrange Suite 200S	07 / 07 / Y Y Y Y 007 / 007 / 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4466		
		NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		15.00 Payroll Deduction \$15.00		
	Name of Employer Gentiva Health Services	Occupation	NVP Nursing Operations	Biweekly		
	Inc. Receipt For:		Year-to-Date V	_		
	Primary General Other (specify) ▼		210.00]		
<u></u>	Full Name (Last, First, Middle Initial) John Aurelio			Date of Receipt		
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 07 21 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4511		
		NY	11747	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		15.00 Payroll Deduction \$15.00		
	Name of Employer Gentiva Health Services Inc.	U U	VP Nursing Operations	Biweekly		
	Receipt For: Primary General	Aggregate	Year-to-Date V			
	Other (specify)	225.00				
s	UBTOTAL of Receipts This Page (optional)		••••••	45.00		
T	OTAL This Period (last page this line number of	nly)	· · · · · · · · · · · · · · · · · · ·			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 60 (check only one)			
			or each category of the Detailed Summary Page	X 11a 11b 11c 12			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may ame and add	r not be sold or used by any perso dress of any political committee to	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
A.	Full Name (Last, First, Middle Initial) John Aurelio	Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	08 / 04 / Y Y Y Y 08 04					
	City	State	Zip Code	Transaction ID: SA11A1.4512			
	Melville FEC ID number of contributing	NY	11747	Amount of Each Receipt this Period			
	federal political committee.	C		Payroll Deduction \$15.00			
	Name of Employer Gentiva Health Services	Occupation Regional	N VP Nursing Operations	Biweekly			
	Inc. Receipt For:		Year-to-Date V	-			
	Primary General Other (specify) v	0 0	240.00				
в.	Full Name (Last, First, Middle Initial) John Aurelio			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	08 / D D / Y Y Y Y 18 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4513			
		NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00 Payroll Deduction \$15.00			
	Name of Employer Gentiva Health Services	Occupation	۱ VP Nursing Operations	Biweekly			
	Inc. Receipt For:		Year-to-Date V	-			
	Primary General Other (specify) ▼		255.00]			
с.	Full Name (Last, First, Middle Initial) John Aurelio			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M · M / D · D / Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y · Y · Y · Y · Y ·			
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4514			
	FEC ID number of contributing		11/4/	Amount of Each Receipt this Period			
	federal political committee.	C		15.00 Payroll Deduction \$15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation Regional	n VP Nursing Operations	Biweekly			
	Receipt For: Primary General	Aggregate	Year-to-Date V				
	Other (specify) ▼						
s	UBTOTAL of Receipts This Page (optional)			45.00			
Т	OTAL This Period (last page this line number o	nly)					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 12/60								
					(check only one)								
••			Detailed Summary Page				11b	\square	110	-	12	_	ı
				Ļ	13		14	Ц	15		16		17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	on for solic	the pur	pose butior	of sol ns froi	ncitii m si	ng c uch	comr	mittee	s			
\mathbb{N}	NAME OF COMMITTEE (In Full)												
\backslash	GENTIVA HEALTH SERVICES INC PA	APAC											
Α.	Full Name (Last, First, Middle Initial) John Aurelio				Date c	f Rec	eipt						
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			м м 0 9	1 /	D 1	^D 5			2 0 0		
	City	State	Zip Code		Transa	action	ID:	SA	11A	1.45	515		
	Melville	NY	11747	_	Amou	nt of E	Each I	Rec	eipt	this F	Perioc	1	
	FEC ID number of contributing federal political committee.	C									15.	00	
	Name of Employer Gentiva Health Services	Occupation	n VP Nursing Operations		Payrol Biweeł	Ded ly	luctic	n \$	515.	.00			
	Inc. Receipt For:		e Year-to-Date V										
	Primary General			11									
	Other (specify)	1 1	285.00										
в.	Full Name (Last, First, Middle Initial) John Aurelio				Date o	of Rec	eipt						
	Mailing Address 3 Huntington Quadrangle Suite 200S						2	^D 9			2 0 °0		
	City	State Zip Code				action	ID:	SA	11A	1.45	516		
	Melville	NY	11747		Amou	nt of E	Each I	Rec	eipt	this F	Perioc	1	
	FEC ID number of contributing federal political committee.	C									15.	00	
	Name of Employer	Occupation	ſ		Payrol Biweek		luctic	n \$	\$15.	.00			
	Gentiva Health Services Inc.	Regional	VP Nursing Operations		Divicei	.i y							
	Receipt For:	Aggregate	e Year-to-Date 🔻										
	Other (specify)		300.00]									
— c.	Full Name (Last, First, Middle Initial) Mara Benner				Date c	of Rec	eint						
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			м л 07	_	D 0		/ []		2 0 °0		
	City	State	Zip Code]	Transa	ction	D:	SA	11A	1.44	167		
	Melville	NY	11747		Amou	nt of E	Each I	Rec	eipt	this F	Perioc	1	
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 25.00								
	Name of Employer Gentiva Health Services	Occupation	n		Payrol Biweek	Ded	lcutic	n \$	325.	.00			
	Gentiva Health Services Inc.		sident Government Affairs			,							
	Receipt For:	Aggregate	e Year-to-Date 🔻										
	Primary General Other (specify) ▼	0 0	350.00										
s	UBTOTAL of Receipts This Page (optional)			•							55.0	00	
⊢	,		•	-		-				-		0 0	

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)			FOR LINE NUMBER: PAGE 13/60							
ΙТ	EMIZED RECEIPTS	FCFIPTS or each category of the			(check only one)								
			Detailed Summary Page			Н	14	Н	15	· -	$\frac{12}{16}$		7
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may	y not be sold or used by any perso dress of any political committee to	on for solic	13 the purcit contr	rpose ibutio	of so	liciti m s	ng c	contril	bution	s	-
\sum	NAME OF COMMITTEE (In Full)												
\mathbb{Z}	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC										
A.	Full Name (Last, First, Middle Initial) Mara Benner				Date o	of Rec	ceipt						
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			м 07	Λ /	D 2	D 1	/		200		
	City	State	Zip Code		Transa	action	n ID:	SA	11A	1.45	517		
	Melville	NY	11747	_	Amou	nt of I	Each	Rec	eipt	this I	Period		
	FEC ID number of contributing federal political committee.									-	25.	00	
	Name of Employer Gentiva Health Services	Occupation	ⁿ sident Government Affairs		Payrol Biweel	l Dec kly	ductio	on s	\$25	.00			
	Inc. Receipt For:		e Year-to-Date V	_									
	Primary General		375.00	1									
	Other (specify)	0 0											
в.	Full Name (Last, First, Middle Initial) Mara Benner				Date o	of Rec	ceipt						_
	Mailing Address 3 Huntington Quadrangle Suite 200S							^D 4	/		2 0 0		
	City	State		Transa	action	n ID:	SA	11 <i>A</i>	1.45	518			
	Melville	NY	11747	_	Amou	nt of I	Each	Rec	eipt	this I	Period		
	FEC ID number of contributing federal political committee.	C									25.	00	
	Name of Employer Gentiva Health Services	Occupation	n		Payrol Biweel		ducito	on s	\$25	.00			
	Inc.		sident Government Affairs			•							
	Receipt For: Primary General	Aggregate	e Year-to-Date V										
	Other (specify) ▼		400.00										
<u>с.</u>	Full Name (Last, First, Middle Initial) Mara Benner			╈	Dated	of Rec	ceipt						_
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			м 0 8	A /		D 8	′		2 0 ^v 0		
	City	State	Zip Code		Transa	action	n ID:	SA	11A	1.45	519		
	Melville	NY	11747	_	Amou	nt of I	Each	Rec	eipt	this I	Period		
	FEC ID number of contributing federal political committee.	C			25.00								
	Name of Employer Gentiva Health Services	Occupation			Payrol Biweel	i Dec (ly	uctio	on §	¢25	.00			
	Inc.		sident Government Affairs			-							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻										
	Other (specify)	0 0	425.00										
s	UBTOTAL of Receipts This Page (optional)		••••••								75.0	00]
\vdash				-									1

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 14 / 60					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
Ν	NAME OF COMMITTEE (In Full)								
\langle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC						
Α.	Full Name (Last, First, Middle Initial) Mara Benner			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4520					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			25.00					
	Name of Employer Gentiva Health Services	Occupation	n sident Government Affairs	Payroll Deduction \$25.00 Biweekly					
	Inc. Receipt For:		e Year-to-Date V						
	Primary General	Ayyreyale		1					
	Other (specify)	0 0	450.00						
в.	Full Name (Last, First, Middle Initial) Mara Benner			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 09 15 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4522					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		25.00 Payroll Deduction \$25.00 Biweekly					
	Name of Employer Gentiva Health Services	Occupation	n sident Government Affairs						
	Inc. Receipt For:		e Year-to-Date V	-					
	Primary General	33 - 3		1					
	Other (specify) v	0 0	475.00						
с.	Full Name (Last, First, Middle Initial) Mara Benner			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 29 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4523					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		25.00					
	Name of Employer Gentiva Health Services	n sident Government Affairs	Payroll Deduction \$25.00 Biweekly						
Inc. Receipt For:		-	e Year-to-Date V	1					
Primary General Other (specify) ▼			500.00]					
s	UBTOTAL of Receipts This Page (optional)		·····	75.00					
	OTAL This Period (last page this line number o								

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/60						
	EMIZED RECEIPTS		or each category of the	(check only one)						
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			on for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
\rangle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC							
Α.	Full Name (Last, First, Middle Initial) David Bottle	id Bottle								
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 6						
	City	State	Zip Code	Transaction ID: SA11A1.4468						
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			20.00						
	Name of Employer Gentiva Health Services	Occupation	n arecentrix Procurement	Payroll Deduction \$20.00 Biweekly						
	Inc. Receipt For:	Aggregate	e Year-to-Date ▼	_						
	Primary General		000.00	1						
	Other (specify) 🔻	0 0	280.00							
в.	Full Name (Last, First, Middle Initial) David Bottle			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	07 / 21 / Y Y Y Y 007 / 21								
	City	Transaction ID: SA11A1.4524								
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Dedcution \$20.00 Biweekly						
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Ca	n arecentrix Procurement							
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	300.00]						
 C.	Full Name (Last, First, Middle Initial) David Bottle			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 0 8 0 4 2 0 0 6						
	City	State	Zip Code	Transaction ID: SA11A1.4525						
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		20.00						
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Ca	n arecentrix Procurement	Payroll Deduction \$20.00 Biweekly						
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	320.00]						
s	LUBTOTAL of Receipts This Page (optional)			60.00						
Т	OTAL This Period (last page this line number o	nly)	· · ·							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/60					
			or each category of the	(check only one)					
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$					
	y information copied from such Reports and Sta for commercial purposes, other than using the r			on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)		,,						
\rangle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC						
Α.	Full Name (Last, First, Middle Initial) David Bottle								
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4526					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			20.00					
	Name of Employer Gentiva Health Services	Occupation	n arecentrix Procurement	Payroll Deduction \$20.00 Biweekly					
	Inc. Receipt For:	Aggregate	e Year-to-Date ▼	_					
	Primary General		040.00	1					
	Other (specify) 🔻	0 0	340.00						
в.	Full Name (Last, First, Middle Initial) David Bottle			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	09 / D D / Y Y Y Y 2006							
	City	Transaction ID: SA11A1.4527							
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00 Biweekly					
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Ca	n arecentrix Procurement						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General Other (specify) ▼		360.00]					
<u> </u>	Full Name (Last, First, Middle Initial) David Bottle			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 15 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4528					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		20.00					
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Ca	n arecentrix Procurement	Payroll Deduction \$20.00 Biweekly					
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	380.00]					
s	LUBTOTAL of Receipts This Page (optional)		••••••	60.00					
Т	OTAL This Period (last page this line number o	nly)	· · ·						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/60					
			or each category of the	(check only one)					
••			Detailed Summary Page	X 11a 11b 11c 12					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	on for the purpose of soliciting contributions solicit contributions from such committee.							
Ν	NAME OF COMMITTEE (In Full)								
\rangle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC						
Α.	Full Name (Last, First, Middle Initial) David Bottle			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 / 29 / 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4529					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			20.00					
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$20.00 Biweekly					
	Inc. Receipt For:		arecentrix Procurement	_					
	Primary General	Ayyreyaid		1					
	Other (specify)	0 0	400.00						
в.	Full Name (Last, First, Middle Initial) Cindy Brown		Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	07 / D D / Y Y Y Y 07 2006							
	City	Transaction ID: SA11A1.4469							
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00 Payroll Deduction \$15.00 Biweekly					
	Name of Employer Gentiva Health Services	Occupation Branch D							
	Inc. Receipt For:		e Year-to-Date V						
	Primary General	00 0		1					
	Other (specify)	0 0	210.00						
с.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4530					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00					
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$15.00 Biweekly					
	Inc. Receipt For:		e Year-to-Date ▼	-					
Primary General Other (specify) ▼			225.00]					
s	I UBTOTAL of Receipts This Page (optional)			50.00					
Т	OTAL This Period (last page this line number o	nly)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 60 (check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	$\begin{array}{c c} \hline X & 11a \\ \hline 13 & 14 \\ \hline 15 & 16 \\ \hline 17 \\ \hline \end{array}$					
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
\langle	GENTIVA HEALTH SERVICES INC PAG	C GENTIV	APAC						
Α.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M · M / D · D / Y · Y · Y · Y Y					
	City	State	Zip Code	Transaction ID: SA11A1.4531					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			15.00					
	Name of Employer Gentiva Health Services	Occupation Branch D		payroll Deduction \$15.00 Biweekly					
	Inc. Receipt For:		Year-to-Date V	_					
	Primary General Other (specify)		240.00	1					
		0 0	0 0 0 0 0 0 0						
в.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4532					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		15.00 Payroll Deduction \$15.00 Biweekly					
	Name of Employer Gentiva Health Services	Occupation							
	Inc.	Branch D							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1					
	Other (specify)	0 0	255.00						
с.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 01 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4533					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		15.00					
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$15.00 Biweekly					
	Inc. Receipt For:		e Year-to-Date 🔻						
Primary General Other (specify) ▼			270.00]					
s	UBTOTAL of Receipts This Page (optional)		······	45.00					
	OTAL This Period (last page this line number or			-					

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19 / 60					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
\sum	NAME OF COMMITTEE (In Full)								
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC						
Α.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4534					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			15.00					
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$15.00 Biweekly					
	Inc. Receipt For:	Branch D		_					
	Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify)	0 0	285.00						
в.	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y							
	City	Transaction ID: SA11A1.4535							
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00					
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$15.00 Biweekly					
	Inc. Receipt For:		e Year-to-Date ▼	-					
	Primary General	00 0		1					
	Other (specify)	0 0	300.00						
С.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 07 07 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4471					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		30.00					
	Name of Employer Gentiva Health Services Inc.	Payroll Deduction \$30.00 Biweekly are							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General Other (specify) ▼	0 0	435.00]					
s	I UBTOTAL of Receipts This Page (optional)		••••••	60.00					
Т	OTAL This Period (last page this line number o	nly)							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 60					
	EMIZED RECEIPTS		or each category of the	(check only one)					
	EIVIIZED RECEIFIS		Detailed Summary Page	X 11a 11b 11c 12					
					17				
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	n for the purpose of soliciting contributions solicit contributions from such committee.							
\mathbb{N}	NAME OF COMMITTEE (In Full)								
\backslash	GENTIVA HEALTH SERVICES INC PAC								
Α.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt					
	Mailing Address 3 Huntington Quadrangle Suite 200S	9		07 21 YYYY 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4542					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		30.00					
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$30.00 Biweekly					
	Inc.		ce President Home Healthca	Ύ θ −					
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify)		465.00						
		0 0							
в.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt					
	Mailing Address 3 Huntington Quadrangle	M M / D D / Y Y Y Y 08 04 2006							
	City Suite 200S								
	Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4543					
				Amount of Each Receipt this Period	1				
	FEC ID number of contributing federal political committee.	С		30.00					
				Payroll Deduction \$30.00					
	Name of Employer Gentiva Health Services	Occupation		Biweekly					
	Inc. Receipt For:		ce President Home Healthca	~e					
	Primary General	Aggregate	Year-to-Date ▼						
	Other (specify) ▼		495.00						
	Full Name (Last, First, Middle Initial)								
C.	Robert Creamer			Date of Receipt					
	Mailing Address 3 Huntington Quadrangle Suite 200S	9		08 / D D / Y Y Y Y 18 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4544					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.00					
				Payroll Deduction \$30.00	1				
	Name of Employer Gentiva Health Services	Occupation		Biweekly					
	Inc.		ce President Home Healthca						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)		525.00						
		0 0							
					1				
s	UBTOTAL of Receipts This Page (optional)			90.00					
F			/		1				

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 60 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
Α.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	e		0 9 / D D / Y Y Y Y 0 1 2 0 0 6			
	City Male ille	State	Zip Code	Transaction ID: SA11A1.4545			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			30.00 Payroll Deduction \$30.00			
	Name of Employer Gentiva Health Services	Occupation	n ice President Home Healthca	Biweekly			
	Inc. Receipt For:		Year-to-Date V				
	Primary General Other (specify) ▼		555.00				
в.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	M M / D D Y					
	City	State	Zip Code	Transaction ID: SA11A1.4546			
		NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$30.00 Biweekly			
	Inc. Receipt For:		ce President Home Healthca ≥ Year-to-Date ▼				
	Primary General Other (specify)		585.00				
<u></u>	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 29 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4548			
		NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Gentiva Health Services Inc.		n ice President Home Healthca	Payroll Deduction \$30.00 Biweekly re			
	Receipt For: Primary General Other (specify) \bigtriangledown	Aggregate	e Year-to-Date ▼ 615.00				
s	UBTOTAL of Receipts This Page (optional)			90.00			
Т	OTAL This Period (last page this line number or	nly)					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/60				
	EMIZED RECEIPTS		or each category of the	(check only one)				
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	/ not be sold or used by any pers	on for the purpose of soliciting contributions				
<u>,</u>	NAME OF COMMITTEE (In Full)							
	GENTIVA HEALTH SERVICES INC PA							
Α.	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt				
	Mailing Address 3 Huntington Quadrang Suite 200S	le		07 / 07 / Y Y Y Y 06				
	City Stat		Zip Code	Transaction ID: SA11A1.4472				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			25.00				
	Name of Employer Gentiva Health Services	Occupation	n sident Tax	Payroll Deduction \$25.00 Biweekly				
	Inc. Receipt For:		e Year-to-Date ▼	-				
	Primary General Other (specify) ▼		350.00	1				
	Full Name (Last, First, Middle Initial)							
В.	Douglas Dahlgard			Date of Receipt				
	Mailing Address 3 Huntington Quadrang Suite 200S	Suite 200S						
	City Mohille	Transaction ID: SA11A1.4549						
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00 Payrll Deduciton \$25.00 Biweekly				
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Tax					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	375.00]				
	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt				
-	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y				
	City	State	Zip Code	Transaction ID: SA11A1.4550				
	Melville	NY	11747	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25.00				
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Tax	Payroll Deduction \$25.00 Biweekly				
Receipt For:		Aggregate	e Year-to-Date 🔻					
Primary General Other (specify) ▼			400.00]				
s	I UBTOTAL of Receipts This Page (optional)			75.00				
	OTAL This Period (last page this line number o		•					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 23 / 60 (check only one) X 11a 11b 11c 12				
			Detailed Summary Page				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
$\overline{\mathbf{\nabla}}$	NAME OF COMMITTEE (In Full)						
\geq	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
Α.	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		08 / D D / Y Y Y Y 08 18 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4551			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee. Name of Employer Gentiva Health Services Vice Presi			25.00			
			n	Payroll Deduciton \$25.00 Biweekly			
	Inc.		sident Tax				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify)	0 0	425.00				
в.	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	M M / D D / Y Y Y Y 09 / 01 / 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4554			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00 Payroll Deduction \$25.00			
	Name of Employer Gentiva Health Services	Occupatio		Biweekly			
	Inc. Receipt For:		sident Tax e Year-to-Date ▼				
	Primary General	riggrogaio		1			
	Other (specify)	0 0	450.00				
C.	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt			
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 / 15 / 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4555			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	<u>IIIC.</u>		n sident Tax	Payroll Deduction \$25.00 Biweekly			
			e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	475.00]			
s	UBTOTAL of Receipts This Page (optional)			75.00			
⊢	OTAL This Period (last page this line number or						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 24/60			
	EMIZED RECEIPTS	or each category of the		(check only one)			
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
	y information copied from such Reports and Sta for commercial purposes, other than using the r	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)						
$\left \right\rangle$	GENTIVA HEALTH SERVICES INC PA						
<u>А</u> .	Full Name (Last, First, Middle Initial) Douglas Dahlgard	Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S						
	City Sta		Zip Code	Transaction ID: SA11A1.4556			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer Gentiva Health Services	Occupation	n sident Tax	Payroll Deduction \$25.00 Biweekly			
	Inc. Receipt For:		e Year-to-Date V	_			
	Primary General Other (specify) ▼		500.00]			
<u> </u>	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 07 07 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4476			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Fina	n ancial Operations	Payroll Deduction \$15.00 Biweekly			
	Receipt For:	1	Year-to-Date V				
	Primary General Other (specify) ▼	U U U	210.00]			
 C.	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		07 21 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4575			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Fina	n ancial Operations	Payroll Deduction \$15.00 Biweekly			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify)]				
s	LUBTOTAL of Receipts This Page (optional)			55.00			
	OTAL This Period (last page this line number o						

SCHEDULE A (FEC Form 3X)			Lico congrato cohodulo(c)	FOR LINE NUMBER: PAGE 25 / 60			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
••			Detailed Summary Page	X 11a 11b 11c 12			
Δ.	y information copied from such Reports and Sta	atomonto mo		13 14 15 16 17			
	for commercial purposes, other than using the r						
Ν	NAME OF COMMITTEE (In Full)						
\backslash	GENTIVA HEALTH SERVICES INC PA						
Α.	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y			
	City State Melville NY		Zip Code	Transaction ID: SA11A1.4576			
			11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$15.00 Biweekly			
	Inc. Receipt For:		ancial Operations e Year-to-Date ▼	_			
	Primary General	7.99.094.0		1			
	Other (specify) v	0 0	240.00				
в.	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y					
	City	State	Zip Code	Transaction ID: SA11A1.4579			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$15.00 Biweekly			
	Inc. Receipt For:	1	ancial Operations e Year-to-Date ▼	_			
	Primary General	Ayyreyale		1			
	Other (specify)	0 0	255.00				
<u>с.</u>	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 01 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4580			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Fina	n ancial Operations	Payroll Deduction \$15.00 Biweekly			
	Receipt For:	-	e Year-to-Date ▼	1			
	Primary General Other (specify) ▼	0 0	270.00]			
s	UBTOTAL of Receipts This Page (optional)		·····	45.00			
	OTAL This Period (last page this line number o						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 60			
			or each category of the	(check only one)			
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
	y information copied from such Reports and Sta for commercial purposes, other than using the r			on for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full)						
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
Α.	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y					
	City State Melville NY		Zip Code	Transaction ID: SA11A1.4582			
			11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services	Occupation	n ancial Operations	Payroll Deduction \$15.00 Biweekly			
	Inc. Receipt For:	-	Year-to-Date ▼	_			
	Primary General Other (specify) v		285.00]			
— B	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt			
υ.	Mailing Address 3 Huntington Quadrang						
	Suite 200S	0 9 2 9 2 0 0 6 Transaction ID: SA11A1.4583					
	Melville	State NY	Zip Code 11747	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Fina	n ancial Operations	Payroll Deduction \$15.00 Biweekly			
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		300.00]			
 C.	Full Name (Last, First, Middle Initial) Michael Hannah			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 07 07 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4478			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Information Services	Payroll Deduction \$30.00 Biweekly			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	420.00]			
s	UBTOTAL of Receipts This Page (optional)		••••••	60.00			
Т	OTAL This Period (last page this line number o	nly)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 60 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC	
Α.	Full Name (Last, First, Middle Initial) Michael Hannah	Date of Receipt		
	Mailing Address 3 Huntington Quadrang Suite 200S	07 / 21 / Y Y Y Y 2006		
	City		Zip Code	Transaction ID: SA11A1.4590
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00 Payroll Deduction \$30.00
	Name of Employer Gentiva Health Services	Occupation	n sident Information Services	Biweekly
	Inc. Receipt For:		e Year-to-Date V	-
	Primary General Other (specify) ▼		450.00]
в.	Full Name (Last, First, Middle Initial) Michael Hannah			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	M · M / D · D / Y · Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y Y · Y · Y Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y · Y · Y · Y · Y ·		
	City	State	Zip Code	Transaction ID: SA11A1.4591
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period 30.00
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Information Services	Payroll Deduction \$30.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00]
<u></u>	Full Name (Last, First, Middle Initial) Michael Hannah			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y Y Y Y 0 8 1 8 2 0 0 6
	City Mohille	State	Zip Code	Transaction ID: SA11A1.4592
	Melville FEC ID number of contributing federal political committee.	NY C	11747	Amount of Each Receipt this Period 30.00
				Payroll Deduction \$30.00
	Name of Employer Gentiva Health Services Inc.		sident Information Services	Biweekly
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 510.00]
s	UBTOTAL of Receipts This Page (optional)			90.00
Т	OTAL This Period (last page this line number o	nly)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 28 / 60
· · /			Use separate schedule(s) or each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	/ not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	GENTIVA HEALTH SERVICES INC PAC	GENTIV	APAC	
Α.	Full Name (Last, First, Middle Initial) Michael Hannah	Date of Receipt		
	Mailing Address 3 Huntington Quadrangle Suite 200S	0 9 / 0 1 / Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.4593
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Gentiva Health Services Inc.	Occupation	n sident Information Services	Payroll Deduction \$30.00 Biweekly
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	540.00]
в.	Full Name (Last, First, Middle Initial) Michael Hannah			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S	09 / 15 / Y Y Y 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4594
		NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00 Payroll Deduction \$30.00
	Name of Employer Gentiva Health Services	Occupation	n sident Information Services	Biweekly
	Inc. Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	570.00]
<u></u>	Full Name (Last, First, Middle Initial) Michael Hannah			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S	9		M M / D D / Y Y Y Y Y 09 / 29 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.4595
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period 30.00
	Name of Employer Gentiva Health Services	Occupation	n sident Information Services	Payroll Deduction \$30.00 Biweekly
	Inc. Receipt For:		Year-to-Date ▼	-1
	Primary General Other (specify)		600.00]
	UBTOTAL of Receipts This Page (optional)			90.00

TOTAL This Period (last page this line number only)

▶

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 60			
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	(check only one)			
			Detailed Summary Page	13 14 15 16 17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r						
\sum	NAME OF COMMITTEE (In Full)						
\langle	GENTIVA HEALTH SERVICES INC PA						
Α.	Full Name (Last, First, Middle Initial) Beatrice Hoffman	Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 07 / 07 / 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4479			
	Melville NY		11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services	Occupation	n laged Care	Payroll Deduction \$15.00 Biweekly			
	Inc. Receipt For:	-	Year-to-Date ▼	_			
	Primary General			1			
	Other (specify)	0 0	210.00				
в.	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 07 / 21 / 2006					
	City	State	Zip Code	Transaction ID: SA11A1.4596			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services	Occupation	n laged Care	Payroll Deduction \$15.00 Biweekly			
	Inc. Receipt For:		Year-to-Date V				
	Primary General		225.00	1			
	Other (specify)	0 0	223.00				
C.	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y			
	City	State	Zip Code	Transaction ID: SA11A1.4597			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		15.00			
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Mar	n laged Care	Payroll Deduction \$15.00 Biweekly			
	Receipt For:		Year-to-Date V	_			
	Primary General Other (specify) ▼		240.00]			
		4 4 0					
s	UBTOTAL of Receipts This Page (optional)			45.00			
т	OTAL This Period (last page this line number o	nly)					

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 60 (check only one) 11a 11b 11c 12 X 11a 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
\rangle	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC	
Α.	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		08 / D D / Y Y Y Y 08 / 18 / 2006
	City State		Zip Code	Transaction ID: SA11A1.4599
		NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Gentiva Health Services	Occupatio		 Payroll Deduction \$15.00 Biweekly
	Inc. Receipt For:	-	naged Care	
	Primary General Other (specify) ▼		255.00]
в.	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 09 / 01 / 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4600
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period
	Name of Employer Gentiva Health Services Inc.	Occupation	n naged Care	 Payroll Deduction \$15.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00]
<u></u>	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y Y Y Y 09 15 2006
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4601 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Gentiva Health Services Inc.	Occupation AVP Mar	n naged Care	Payroll Deduction \$15.00 Biweekly
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 285.00]
s	UBTOTAL of Receipts This Page (optional)			45.00
Т	OTAL This Period (last page this line number o	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 60 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
$\left[\right]$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA			
\square	GENTIVA HEALTH SERVICES INC PA			
Α.	Full Name (Last, First, Middle Initial) Beatrice Hoffman			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		09 29 2006
	City State		Zip Code	Transaction ID: SA11A1.4602
	Melville NY		11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Gentiva Health Services	Occupatio		Payroll Deduction \$15.00 Biwekly
	Inc. Receipt For:		naged Care	
	Primary General	Aggregate		1
	Other (specify)	0 0	300.00	
в.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	07 07 7 07 07 07		
	City	State	Zip Code	Transaction ID: SA11A1.4480
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly
	Receipt For:		e Year-to-Date V	
	Primary General Other (specify) ▼	0 0	280.00]
<u> </u>	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		07 21 Y Y Y Y Y 2006
	City	State	Zip Code	Transaction ID: SA11A1.4605
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly
	Receipt For:	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	300.00]
s	LUBTOTAL of Receipts This Page (optional)			55.00
	OTAL This Period (last page this line number o			

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 32/60			
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)			
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$			
	y information copied from such Reports and Sta for commercial purposes, other than using the r	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)						
\rangle	GENTIVA HEALTH SERVICES INC PA						
Α.	Full Name (Last, First, Middle Initial) Mary Jalwan		Date of Receipt				
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y					
	City State Melville NY		Zip Code	Transaction ID: SA11A1.4606			
			11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly			
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	320.00]			
в.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 0 8 1 8 2 0 0 6					
	City	State	Zip Code	Transaction ID: SA11A1.4607			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		20.00			
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly			
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	340.00				
 C.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 01 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4608			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly			
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify) ▼						
s	LUBTOTAL of Receipts This Page (optional)			60.00			
Т	OTAL This Period (last page this line number o	nly)					

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 33 / 60			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
••			Detailed Summary Page	X 11a 11b 11c 12			
	y information copied from such Reports and Sta						
or	for commercial purposes, other than using the r	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)						
\backslash	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC				
Α.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y					
	City		Zip Code	Transaction ID: SA11A1.4609			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$20.00 Biweekly			
	Inc. Receipt For:	RVP Sale	e Year-to-Date ▼	_			
	Primary General	Aggregate		1			
	Other (specify)	0 0	380.00				
в.	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y					
	City	State Zip Code					
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sale		Payroll Deduction \$20.00 Biweekly			
	Receipt For:	Aggregate	e Year-to-Date ▼	_			
	Primary General		400.00	1			
	Other (specify) 🔻						
с.	Full Name (Last, First, Middle Initial) Jennifer Johnson			Date of Receipt			
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y			
	City	State	Zip Code	Transaction ID: SA11A1.4615			
	Melville	NY	11747	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		12.00			
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$12.00 Biweekly			
	Inc. Receipt For:		e Year-to-Date V	-			
	Primary General Other (specify) ▼		204.00]			
s	LUBTOTAL of Receipts This Page (optional)		······	52.00			
	OTAL This Period (last page this line number o						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 60 (check only one) 11a X 11a 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
$\langle \rangle$	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC	
́А.	Full Name (Last, First, Middle Initial) Jennifer Johnson	Date of Receipt		
	Mailing Address 3 Huntington Quadrangl Suite 200S	M M / D D / Y Y Y Y 09 01 2006		
	City State		Zip Code	Transaction ID: SA11A1.4616
	Melville NY		11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer Gentiva Health Services	Occupation	n	Payroll Deduction \$12.00 Biweekly
	Inc.	Branch D	Director	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	216.00]
в.	Full Name (Last, First, Middle Initial) Jennifer Johnson			Date of Receipt
	Mailing Address 3 Huntington Quadrangl Suite 200S	M M M / D D / Y Y Y Y Y 09 / 15 / 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4618
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$12.00 Biweekly
	Inc. Receipt For:	Branch D	e Year-to-Date V	_
	Primary General Other (specify)		228.00]
<u>с.</u>	Full Name (Last, First, Middle Initial) Jennifer Johnson			Date of Receipt
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 29 2006
	City	State	Zip Code	Transaction ID: SA11A1.4619
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		Payroll Deduction \$12.00 Biweekly
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		240.00	
s	UBTOTAL of Receipts This Page (optional)			36.00
т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 60 (check only one) 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC	
Α.	Full Name (Last, First, Middle Initial) Joanne Kassebaum	Date of Receipt		
	Mailing Address 3 Huntington Quadrang Suite 200S	е		07 / D D / Y Y Y Y 07 / 07 / 2006
	City Stat		Zip Code	Transaction ID: SA11A1.4482
	Melville NY		11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Gentiva Health Services	Occupatio		Payroll Deduction \$40.00 Biweekly
	Inc. Receipt For:	AVP - Ma	arketing e Year-to-Date V	_
	Primary General Other (specify) ▼		560.00]
в.	Full Name (Last, First, Middle Initial) Joanne Kassebaum			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 07 21 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4620
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period 40.00
	Name of Employer Gentiva Health Services Inc.	Occupation		Payroll Deduction \$40.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00]
<u>с.</u>	Full Name (Last, First, Middle Initial) Joanne Kassebaum			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M = M / D = D / Y = Y = Y Y 0 8 0 4 2 0 0 6
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4621 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Gentiva Health Services Inc.	Occupation		Payroll Deduction \$40.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 640.00]
s	UBTOTAL of Receipts This Page (optional)		······	120.00
Т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 60 (check only one) 11a X 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.					
AME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC					
Α.	II Name (Last, First, Middle Initial) anne Kassebaum			Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S			0 8 / D D / Y Y Y Y 1 8 2 0 0 6	
	Sity State		Zip Code	Transaction ID: SA11A1.4622	
	1elville NY		11747	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer Gentiva Health Services	Occupatio		Payroll Deduction \$40.00 Biweekly	
	Inc.		arketing ≥ Year-to-Date ▼	-	
	Primary General	Ayyreyaid		1	
	Other (specify)	0 0	680.00		
в.				Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S			09 / D D / Y Y Y Y 01 / 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4623	
	Melville	NY	11747	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		40.00 Payroll Deduction \$40.00	
	Name of Employer Gentiva Health Services	Occupation AVP - Ma		Biweekly	
			e Year-to-Date V		
	Primary General Other (specify) ▼		720.00]	
<u></u>	Full Name (Last, First, Middle Initial) Joanne Kassebaum			Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S			M M / D D / Y Y Y Y 09 / 15 / 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4624	
	Melville	NY	11747	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	ral political committee.		40.00 Payroll Deduction \$40.00 Biweekly	
	Name of Employer Gentiva Health Services Inc.				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 760.00]	
SUBTOTAL of Receipts This Page (optional)				120.00	
TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 60 (check only one) 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC							
	Full Name (Last, First, Middle Initial)									
А.	Joanne Kassebaum Mailing Address 3 Huntington Quadrang Suite 200S	е		Date of Receipt						
	City	State	Zip Code	Transaction ID: SA11A1.4625						
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		40.00						
	Name of Employer Gentiva Health Services Inc.	Occupatio AVP - Ma		Payroll Deduction \$40.00 Biweekly						
	Receipt For:		e Year-to-Date ▼							
	Primary General Other (specify) v	0 0	800.00]						
в.	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S		M M / D D / Y Y Y Y 07 / 07 / 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4483						
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		33.00 Payroll Deduction \$33.00						
	Name of Employer Gentiva Health Services	Occupatio VP - Fina	n ancial Operations	Biweekly						
	Inc. Receipt For:		e Year-to-Date V							
	Primary General Other (specify) ▼	U U 0	462.00]						
<u></u>	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y Y Y Y 07 21 2006						
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4628 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		33.00						
	Name of Employer Gentiva Health Services	Occupatio VP - Fina	n ancial Operations	Payroll Deduction \$33.00 Biweekly						
	Inc. Receipt For: Primary General Other (specify) ▼	-	e Year-to-Date ▼ 495.00]						
s	LUBTOTAL of Receipts This Page (optional)			106.00						
T	OTAL This Period (last page this line number o	nly)								

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 60 (check only one)								
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
$\left[\right]$			1540								
\vee	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
Α.	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 08 04 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4629							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		33.00							
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$33.00 Biweekly							
	Inc.		ancial Operations								
	Receipt For: Primary General	Ayyreyate	e Year-to-Date ▼	1							
	Other (specify)	0 0	528.00								
в.	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		08 / D D / Y Y Y Y 08 / 18 / 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4630							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		33.00							
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$33.00 Biweekly							
	Inc. Receipt For:	1	ancial Operations e Year-to-Date ▼	_							
	Primary General	riggi egaie		1							
	Other (specify)	0 0	561.00								
C.	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 / 01 / 2006							
	City Melville	State	Zip Code	Transaction ID: SA11A1.4631							
	FEC ID number of contributing	NY	11747	Amount of Each Receipt this Period							
	federal political committee.	C		Payroll Deduction \$33.00							
	Name of Employer Gentiva Health Services Inc.	Occupation	n ancial Operations	Biweekly							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		594.00]							
s	UBTOTAL of Receipts This Page (optional)			99.00							
T T	OTAL This Period (last page this line number or	וא)	· · · · · · · · · · · · · · · · · · ·	-							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 39 / 60 (check only one)								
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the r			on for the purpose of soliciting contributions								
$\left \right>$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC									
Α.	Full Name (Last, First, Middle Initial) Alfred Lebel	Date of Receipt										
	Mailing Address 3 Huntington Quadrang Suite 200S	le		09 15 Y Y Y Y 09 6								
	City	State	Zip Code	Transaction ID: SA11A1.4632								
		NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		33.00 Payroll Deduction \$33.00								
	Name of Employer Gentiva Health Services	Occupation	n ancial Operations	Biweekly								
	Inc. Receipt For:		e Year-to-Date V	-								
	Primary General Other (specify) ▼		627.00]								
в.	Full Name (Last, First, Middle Initial) Alfred Lebel			Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 29 2006								
	City	State	Zip Code	Transaction ID: SA11A1.4633								
		NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		- Payroll Deduction \$33.00								
	Name of Employer Gentiva Health Services	Occupation	n ancial Operations	Biweekly								
	Inc. Receipt For:	1	e Year-to-Date V									
	Primary General Other (specify) ▼		660.00]								
с.	Full Name (Last, First, Middle Initial) James May, Jr.			Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S			M M / D D / Y Y Y Y 07 07 2006								
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4484 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		30.00								
	Name of Employer Gentiva Health Services Inc.	Occupation Assistant	n t Vice President Human Res	Payroll Deduction \$30.00 Biweekly								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00]								
s	UBTOTAL of Receipts This Page (optional)		••••••	96.00								
Т	OTAL This Period (last page this line number o	only)										

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 40 / 60								
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)								
	EIVIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12								
				13 14 15 16 17								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.								
Ν	NAME OF COMMITTEE (In Full)											
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC									
Α.	Full Name (Last, First, Middle Initial) James May, Jr.			Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y								
	City	State	Zip Code	Transaction ID: SA11A1.4634								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		30.00								
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$30.00 Biweekly								
	Inc. Receipt For:		Vice President Human Res	_								
	Primary General	Aggregate	e Year-to-Date 🔻	1								
	Other (specify)	0 0	450.00									
в.	Full Name (Last, First, Middle Initial) James May, Jr.			Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y										
	City	City State Zip Code										
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		30.00								
	Name of Employer Gentiva Health Services	Occupation	n t Vice President Human Res	Payroll Deduction \$30.00 Biweekly								
	Inc. Receipt For:		Year-to-Date ▼									
	Primary General	7.99.094.0		1								
	Other (specify)	0 0	480.00									
с.	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 07 07 2006								
	City	State	Zip Code	Transaction ID: SA11A1.4486								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		25.00								
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$25.00 Biweekly								
	Inc. Receipt For:		e Year-to-Date V	1								
	Primary General Other (specify) ▼		350.00]								
s	I UBTOTAL of Receipts This Page (optional)			85.00								
T	OTAL This Period (last page this line number o	nly)	· · · ·									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 60 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17						
	information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC							
Α.	Full Name (Last, First, Middle Initial) Lynn McGuire	Date of Receipt								
	Mailing Address 3 Huntington Quadrang Suite 200S	е		07 / 21 / Y Y Y Y 2006						
	City	State	Zip Code	Transaction ID: SA11A1.4643						
	Melville	NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		25.00						
	Name of Employer Gentiva Health Services	Occupatio		 Payroll Deduction \$25.00 Biweekly 						
	Inc. Receipt For:	Branch D								
	Primary General	Ayyreyate	e Year-to-Date ▼	1						
	Other (specify)	0 0	375.00							
В.	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S		0 8 / D D / Y Y Y Y 0 4 2 0 0 6							
	City	State	Zip Code	Transaction ID: SA11A1.4644						
		NY	11747	Amount of Each Receipt this Period 25.00 Payroll Deduction \$25.00						
	FEC ID number of contributing federal political committee.	C								
	Name of Employer Gentiva Health Services	Occupation Branch D		Biweekly						
	Inc. Receipt For:		e Year-to-Date V	_						
	Primary General Other (specify) ▼		400.00]						
<u>с</u> .	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y						
	City	State	Zip Code	Transaction ID: SA11A1.4645						
		NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		25.00						
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D	Director	Payroll Deduction \$25.00 Biweekly						
	Receipt For: Primary General Other (specify) v	Aggregate	e Year-to-Date ▼ 425.00]						
s	UBTOTAL of Receipts This Page (optional)			75.00						
Т	OTAL This Period (last page this line number o	nly)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 60 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
Α.	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		09 / D D / Y Y Y Y 09 / 01 / 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4647							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		25.00							
	Name of Employer Gentiva Health Services	Occupatio		 Payroll Deduction \$25.00 Biweekly 							
	Inc. Receipt For:	Branch E	Director e Year-to-Date V								
	Primary General Other (specify) ▼		450.00]							
в.	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	09 / 15 / Y Y Y 2006									
	City	State	Zip Code	Transaction ID: SA11A1.4649							
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period							
	Name of Employer Gentiva Health Services Inc.	Occupatio Branch D		 Payroll Deduction \$25.00 Biweekly 							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00]							
<u>с</u> .	Full Name (Last, First, Middle Initial) Lynn McGuire			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 / 29 / 2006							
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4650 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		25.00							
	Name of Employer Gentiva Health Services Inc.	Occupatio Branch D		Payroll Deduction \$25.00 Biweekly							
	Receipt For: Primary General Other (specify) v	Aggregate	e Year-to-Date ▼ 500.00]							
s	UBTOTAL of Receipts This Page (optional)			75.00							
Т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 43 / 60									
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)									
	EIVIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12									
•													
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
Ν	NAME OF COMMITTEE (In Full)												
\langle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC										
Α.	Full Name (Last, First, Middle Initial) Margo Nemet			Date of Receipt									
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y									
	City	State	Zip Code	Transaction ID: SA11A1.4653									
	Melville	NY	11747	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		12.00									
	Name of Employer Gentiva Health Services	Occupation	n	Payroll Deduction \$12.00 Biweekly									
	Inc.		Compliance Services										
	Receipt For:	Aggregate	e Year-to-Date 🔻	_									
	Primary General Other (specify) ▼	0 0	204.00										
в.	Full Name (Last, First, Middle Initial) Margo Nemet			Date of Receipt									
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 01 2006									
	City	State	Zip Code	Transaction ID: SA11A1.4654									
	Melville	NY	11747	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		12.00									
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$12.00 Biweekly									
	Inc.	-	Compliance Services										
	Receipt For: Primary General	Aggregate	e Year-to-Date V										
	Other (specify) ▼	0 0	216.00										
<u></u>	Full Name (Last, First, Middle Initial) Margo Nemet			Date of Receipt									
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 0 9 1 5 2 0 0 6									
	City	State	Zip Code	Transaction ID: SA11A1.4655									
	Melville	NY	11747	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		12.00									
	Name of Employer Gentiva Health Services Inc.	Occupation Director	n Compliance Services	Payroll Deduction \$12.00 Biweekly									
	Receipt For:	-	e Year-to-Date ▼										
	Primary General Other (specify) ▼	0 0	228.00]									
s	I UBTOTAL of Receipts This Page (optional)			36.00									
T	OTAL This Period (last page this line number o	nly)	· · · · · · · · · · · · · · · · · · ·										

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 60 (check only one)										
IT	EMIZED RECEIPTS		or each category of the											
			Detailed Summary Page											
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
[]	NAME OF COMMITTEE (In Full)													
\langle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC											
Α.	Full Name (Last, First, Middle Initial) Margo Nemet			Date of Receipt										
	Mailing Address 3 Huntington Quadrange Suite 200S	le		M M / D D / Y										
	City	State	Zip Code	Transaction ID: SA11A1.4656										
	Melville	NY	11747	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		12.00										
	Name of Employer Gentiva Health Services	Occupation	n Compliance Services	Payroll Deduction \$12.00 Biweekly										
	Inc. Receipt For:	-	Year-to-Date V	-										
	Primary General			1										
	Other (specify)	0 0	240.00											
в.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt										
	Mailing Address 3 Huntington Quadrange Suite 200S	le		M M / D D / Y Y Y Y 07 / 07 / 2006										
	City	State	Zip Code	Transaction ID: SA11A1.4489										
	Melville	NY	11747	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		60.00										
	Name of Employer Gentiva Health Services	Occupation	n ce Preisdent/General Couns	Payroll Deduction \$60.00 Biweekly										
	Inc. Receipt For:		Year-to-Date V											
	Primary General	riggrogato		1										
	Other (specify)	0 0	840.00											
с.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt										
	Mailing Address 3 Huntington Quadrangl Suite 200S	le		M M / D D / Y Y Y Y 07 21 2006										
	City	State	Zip Code	Transaction ID: SA11A1.4658										
	Melville	NY	11747	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		60.00										
	Name of Employer Gentiva Health Services Inc.	Occupation Senior Vi	n ce Preisdent/General Couns	 Payroll Deduction \$60.00 Biweekly 										
	Receipt For:	Aggregate	Year-to-Date V	-										
	Primary General		900.00	1										
	Other (specify)	0 0		1										
s	UBTOTAL of Receipts This Page (optional)			132.00										
Т	OTAL This Period (last page this line number of	nly)												

S	CHEDULE A (FEC Form 3X)	[Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 60								
			or each category of the	(check only one)								
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the n			for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
\rangle	GENTIVA HEALTH SERVICES INC PAG											
Α.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt								
	Mailing Address 3 Huntington Quadrangle Suite 200S			M M / D D / Y								
	City	State	Zip Code	Transaction ID: SA11A1.4659								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		60.00								
	Name of Employer Gentiva Health Services	Occupation	n ce Preisdent/General Counse	Payroll Deduction \$60.00 Biweekly								
	Inc. Receipt For:		Year-to-Date V									
	Primary General											
	Other (specify)	0 0	960.00									
В.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt								
	Mailing Address 3 Huntington Quadrangle Suite 200S	e		0 8 / D D / Y Y Y Y 0 8 2 0 0 6								
	City	City State Zip Code										
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		60.00								
	Name of Employer Gentiva Health Services	Occupation	1	 Payroll Deduction \$60.00 Biweekly 								
	Inc.	Senior Vi	ce Preisdent/General Counse									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼	0 0	1020.00									
<u></u>	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt								
	Mailing Address 3 Huntington Quadrangle Suite 200S	e		M M / D D / Y Y Y Y 09 01 2006								
	City	State	Zip Code	Transaction ID: SA11A1.4662								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		60.00								
	Name of Employer	Occupation	1	Payroll Deduction \$60.00 Biweekly								
	Gentiva Health Services Inc.		ce Preisdent/General Counse									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		1080.00									
		0.0										
s	UBTOTAL of Receipts This Page (optional)		····· •	180.00								

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 60								
	EMIZED RECEIPTS		or each category of the	(check only one)								
••			Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full)											
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC									
Α.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt								
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 15 2006								
	City	State	Zip Code	Transaction ID: SA11A1.4663								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		60.00								
	Name of Employer Gentiva Health Services Inc.	Occupation Senior Vi	n ce Preisdent/General Couns	 Payeroll Deduction \$60.00 Biweekly 								
	Receipt For:	Aggregate	Year-to-Date 🔻	_								
	Primary General Other (specify) ▼	0 0	1140.00									
в.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt								
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M · M / D · D / Y · Y · Y · Y Y 0 9 2 9 2 0 0 6 2 0 0 6								
	City	State	Zip Code	Transaction ID: SA11A1.4664								
	Melville	NY	11747	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		60.00								
	Name of Employer Gentiva Health Services Inc.	Occupation Senior Vi	n ce Preisdent/General Couns	Payroll Deduction \$60.00 Biweekly								
	Receipt For:	Aggregate	Year-to-Date 🔻	_								
	Primary General Other (specify) ▼	0 0	1200.00									
<u></u>	Full Name (Last, First, Middle Initial) John Potapchuk			Date of Receipt								
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M M / D D / Y Y Y Y 09 27 2006								
	City	State	Zip Code	Transaction ID: SA11A1.4679								
	Melville	NY	11747-4627	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		3500.00								
	Name of Employer Gentiva Health Services Inc.	Occupation EVP & C	hief Financial Officer									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Other (specify)		3500.00									
s	UBTOTAL of Receipts This Page (optional)		••••••	3620.00								
T	OTAL This Period (last page this line number or	nly)	· · ·									

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47/60									
			or each category of the										
	EIVIIZED RECEIPTS		Detailed Summary Page			11	٥L	-	1c	12			
					13	14		1	-	16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
\mathbb{N}	NAME OF COMMITTEE (In Full)												
$\langle \rangle$	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC										
Α.	Full Name (Last, First, Middle Initial) Susan Sender	Date of Receipt											
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			м м 07	/ D	0 ^D			2 0 0			
	City	State	Zip Code		Transa	ction ID	: S	A11	A1.44	192			
	Melville	NY	11747		Amoun								
	FEC ID number of contributing federal political committee.	C								20.0	00		
	Name of Employer Gentiva Health Services Inc.	Occupation	n ef Nursing Executive		Payroll Biweekl	Deduc y	tion	1\$20	0.00				
	Receipt For:	Aggregate	e Year-to-Date 🔻										
	Primary General		280.00										
	Other (specify)	1 1	280.00										
в.	Full Name (Last, First, Middle Initial) Susan Sender				Date of	Receip	t						
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			^м 7	/ D	^D 21	/		2 0 0			
	City	State	Zip Code		Transa	ction ID	: S/	A11	A1.46	680			
	Melville	NY	11747		Amoun	t of Eac	h Re	eceip	ot this I	Period			
	FEC ID number of contributing federal political committee.	C								20.0	00		
	Name of Employer	Occupation	n		Payroll Biweekl		tion	\$20	0.00				
	Gentiva Health Services Inc.	VP & Chi	ef Nursing Executive	'	JIWEEKI	у							
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General Other (specify) ▼		300.00										
 C.	Full Name (Last, First, Middle Initial) Susan Sender				Date of	Receir	t						
	Mailing Address 3 Huntington Quadrangl Suite 200S	е			0 8 ^M	· ·	04		Y Y	2 0 °			
	City	State	Zip Code		Transa	ction ID	: S	A11	A1.46	581			
	Melville	NY	11747		Amoun	t of Eac	h Re	eceip	ot this I	Period			
	FEC ID number of contributing federal political committee.	C								20.0	00		
	Name of Employer	Occupation	n	⊢ŗ	Payroll	Deduc	tion	\$20	0.00				
	Name of Employer Gentiva Health Services	· ·	ef Nursing Executive		Biẃeekl	у							
	Inc. Receipt For:		e Year-to-Date V										
	Primary General	50 - 5											
	Other (specify)	0 0	320.00										
s	LUBTOTAL of Receipts This Page (optional)		>	I						60.0	00		
F	· · · · · · · · · · · · · · · · · · ·			-				*					

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 48 / 60												
ΙТ			or each category of the			(check only one)									
			Detailed Summary Page			14	\square	15	Η	16	□ 17				
	y information copied from such Reports and State for commercial purposes, other than using the nar										5				
Ν	NAME OF COMMITTEE (In Full)														
\sum	GENTIVA HEALTH SERVICES INC PAC	GENTIV	APAC												
A.	Full Name (Last, First, Middle Initial) Susan Sender			Dat	e of Re	eceipt									
	Mailing Address 3 Huntington Quadrangle Suite 200S			м 0	м / В		D 8	/ Y		0 [°] 0					
	City	State	Zip Code	Trar	sactio	on ID:	SA	11A ⁻	1.468	82					
	Melville	NY	11747	Am	ount of	Each	Rec	eipt t	his P	eriod					
	FEC ID number of contributing federal political committee.	C								20.0	0				
	Gentiva Health Services	Occupatior VP & Chi	n ef Nursing Executive	Biwe		eductio	on \$	520.0	00						
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Primary General Other (specify) ▼	0 0	340.00]											
в.	Full Name (Last, First, Middle Initial) Susan Sender			Dat	e of Re	eceipt									
	Mailing Address 3 Huntington Quadrangle Suite 200S		0 9 / D D / Y Y Y Y 0 2 0 0 6												
	City	State	Zip Code	Trar	Transaction ID: SA11A1.4683										
	Melville	NY	11747	Am	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C									0				
	Contina Hoalth Sonrigon	Occupatior VP & Chi	n ef Nursing Executive	Biwe	Payroll Deduction \$20.00 Biweekly										
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General Other (specify) ▼	0	360.00]											
<u></u> с.	Full Name (Last, First, Middle Initial) Susan Sender			Dat	e of Re	eceipt									
	Mailing Address 3 Huntington Quadrangle Suite 200S			м 0	9 ^M		^D 5	/ Y		0 [°] 0 (
	City	State	Zip Code	Trar	sactio	on ID:	SA	11A ⁻	1.468	84					
	Melville	NY	11747	Am	ount of	Each	Rec	eipt t	his P	eriod					
	FEC ID number of contributing federal political committee.	C			20.00 Payroll Deduction \$20.00										
	Contina Hoalth Sonrigon	Occupatior VP & Chi	n ef Nursing Executive	Biwe	ekly	auctio	un \$	20.(JU						
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General Other (specify) ▼	0 0	380.00												
s	JBTOTAL of Receipts This Page (optional)		••••••							60.0	0				

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

▶

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 49 / 60 (check only one)							
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $							
	y information copied from such Reports and Sta for commercial purposes, other than using the r	on for the purpose of soliciting contributions									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
<u>∠</u>	Full Name (Last, First, Middle Initial) Susan Sender			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y							
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4685 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00							
	Name of Employer Gentiva Health Services Inc.		ef Nursing Executive	Payroll Deduction \$20.00 Biweekly							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 400.00]							
в.	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		07 07 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4493							
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period 20.00 Payroll Deduction \$20.00 Biweekly							
	Name of Employer Gentiva Health Services Inc.	1	e Health Operations								
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 280.00]							
<u>с.</u>	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 07 21 2006							
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4688 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00							
	Name of Employer Gentiva Health Services Inc.	-	e Health Operations	Payroll Deduction \$20.00 Biweekly							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00]							
s	UBTOTAL of Receipts This Page (optional)		•	60.00							
Т	OTAL This Period (last page this line number o	nly)									

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 50 / 60 (check only one)							
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r		on for the purpose of soliciting contributions								
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
A.				Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		08 04 Y Y Y Y 08 04							
	City	State	Zip Code	Transaction ID: SA11A1.4689							
		NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00							
	Name of Employer Gentiva Health Services	Occupation	n e Health Operations	Biweekly							
	Inc. Receipt For:	-	Year-to-Date ▼	-							
	Primary General Other (specify) ▼	0 0	320.00]							
в.	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	08 / D D / Y Y Y Y 08 18 2006									
	City	State	Zip Code	Transaction ID: SA11A1.4690							
	Melville	NY	11747	Amount of Each Receipt this Period 20.00 Payroll Deduction \$20.00 Biweekly							
	FEC ID number of contributing federal political committee.	C									
	Name of Employer Gentiva Health Services	Occupation	n e Health Operations								
	Inc. Receipt For:		Year-to-Date ▼								
	Primary General Other (specify) ▼		340.00								
с.	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y							
	City	State	Zip Code	Transaction ID: SA11A1.4691							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00							
	Name of Employer Gentiva Health Services Inc.	-	e Health Operations	Biweekly							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 360.00	1							
s	UBTOTAL of Receipts This Page (optional)		· · · · · · · · · ·	60.00							
т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 51 / 60 (check only one)							
ITEMIZED RECEIPTS			or each category of the	\overline{X} 11a 11b 11c 12							
			Detailed Summary Page								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
\rangle	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
Α.	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		09 / D D / Y Y Y Y 15 / 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4692							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00							
	Name of Employer Gentiva Health Services	Occupation	n e Health Operations	Payroll Deduction \$20.00 Biweekly							
	Inc. Receipt For:		e Year-to-Date V	_							
	Primary General			1							
	Other (specify) 🔻	0 0	380.00								
в.	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y Y Y Y 09 29 2006									
	City	State	Zip Code	Transaction ID: SA11A1.4693							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00 Payroll Deduction \$20.00 Biweekly							
	Name of Employer Gentiva Health Services	Occupation	n e Health Operations								
	Inc. Receipt For:		e Year-to-Date V	1							
	Primary General										
	Other (specify) v		400.00								
с.	Full Name (Last, First, Middle Initial) W. Berry Sowell			Date of Receipt							
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 09 26 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4702							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.										
	Name of Employer Gentiva Health Services, Inc										
Inc. Receipt For:			e Year-to-Date V	1							
	Primary General Other (specify)		600.00								
_		0 0	<u> </u>								
s	UBTOTAL of Receipts This Page (optional)			640.00							
т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 / 60							
			or each category of the	(check only one)							
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and addr			y not be sold or used by any pers	son for the purpose of soliciting contributions							
<u> </u>	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
<u>к</u>	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrange Suite 200S	е		M M / D D / Y Y Y Y 07 07 2006							
	City	State	Zip Code	Transaction ID: SA11A1.4496							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services	Occupation		Payroll Deduction \$15.00 Biweekly							
	Inc. Receipt For:	Branch D	Year-to-Date V								
	Primary General	Aggregate		-							
	Other (specify)	0 0	210.00								
в.	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	07 / 21 / Y Y Y Y 006									
	City	State	Zip Code	Transaction ID: SA11A1.4710							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$15.00 Biweekly							
	Inc. Receipt For:		Year-to-Date V								
	Primary General Other (specify)		225.00								
		1 0	<u> </u>								
C.	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	е		M · M / D · D / Y							
	City	State	Zip Code	Transaction ID: SA11A1.4711							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		Payroll Deduction \$15.00 Biweekly							
Receipt For:		Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼	0 0	240.00								
s	L UBTOTAL of Receipts This Page (optional)			45.00							
	OTAL This Period (last page this line number of										

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 53 / 60							
ITEMIZED RECEIPTS			or each category of the								
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$							
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)		·····								
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC								
Α.	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrange Suite 200S	е		M M / D D / Y							
	City	State	Zip Code	Transaction ID: SA11A1.4712							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduciton \$15.00 Biweekly							
	Inc. Receipt For:		Year-to-Date V	_							
	Primary General	7.99.094.0		1							
	Other (specify) v	0 0	255.00								
в.	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrangl Suite 200S	M • M / D • D / Y • Y • Y • Y 0 9 0 1 2 0 0 6									
	City	Zip Code	Transaction ID: SA11A1.4713								
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services	Occupation Branch D		Payroll Deduction \$15.00 Biweekly							
	Inc. Receipt For:		Year-to-Date V								
	Primary General		070.00	1							
	Other (specify)	0 0	270.00								
C.	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt							
	Mailing Address 3 Huntington Quadrange Suite 200S	е		M M / D D / Y							
	City	State	Zip Code	Transaction ID: SA11A1.4714							
	Melville	NY	11747	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		15.00							
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		Payroll Deduction \$15.00 Biweekly							
	Receipt For:		e Year-to-Date 🔻								
	Primary General Other (specify) ▼	0 0	285.00]							
s	L UBTOTAL of Receipts This Page (optional)			45.00							
	OTAL This Period (last page this line number of		•								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 60 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17						
	ny information copied from such Reports and Sta for commercial purposes, other than using the r									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIV	APAC							
<u>А.</u>	Full Name (Last, First, Middle Initial) Cynthia Thackston			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	le		09 / 29 / Y Y Y Y 2006						
	City	State	Zip Code	Transaction ID: SA11A1.4715						
		NY	11747	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		15.00 Payroll Deduction \$15.00						
	Name of Employer Gentiva Health Services	Occupatio		Biweekly						
	Inc. Receipt For:	Branch D	Pirector e Year-to-Date V	_						
	Primary General Other (specify) ▼		300.00]						
в.	Full Name (Last, First, Middle Initial) Deborah Thompson			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S			07 [′] 07 [′] 2006						
	City Molvillo	State NY	Zip Code	Transaction ID: SA11A1.4497						
	Melville FEC ID number of contributing federal political committee.	C	11747	Amount of Each Receipt this Period						
	Name of Employer Gentiva Health Services	Occupatio Branch D		 Payroll Deduction \$15.00 Biweekly 						
	Inc. Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 210.00	-						
 C.	Full Name (Last, First, Middle Initial) Deborah Thompson			Date of Receipt						
	Mailing Address 3 Huntington Quadrang Suite 200S	le		M M / D D / Y Y Y Y 07 21 2006						
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4716 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		15.00						
Name of Employer Gentiva Health Services Inc.		Occupatio Branch D		Payroll Deduction \$15.00 Biweekly						
	Receipt For: Primary General Other (specify) •	Aggregate	e Year-to-Date ▼ 225.00]						
s	UBTOTAL of Receipts This Page (optional)			45.00						
Т	OTAL This Period (last page this line number o	nly)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 60 (check only one) I1a X 11a 11b 11c 12 I3 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	ame and add	dress of any political committee to						
Ζ	Full Name (Last, First, Middle Initial)	GENTIV							
Α.	Deborah Thompson Mailing Address 3 Huntington Quadrang	e		Date of Receipt					
	Suite 200S	State	Zip Code	Transaction ID: SA11A1.4717					
	Melville	NY	11747	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00					
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		Payroll Deduction \$15.00 Biweely					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 240.00]					
в.	Full Name (Last, First, Middle Initial) Deborah Thompson			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	M M / D D / Y							
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4718 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00					
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		 Payroll Deduction \$15.00 Biweekly 					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00]					
с.	Full Name (Last, First, Middle Initial) Deborah Thompson			Date of Receipt					
	Mailing Address 3 Huntington Quadrang Suite 200S	е		M M / D D / Y Y Y Y 09 / 01 / 2006					
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4720 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		15.00					
Name of Employer Gentiva Health Services Inc.		Occupation Branch D	Director	Payroll Deduciton \$15.00 Biweekly					
	Receipt For: Primary General Other (specify) $rightarrow$	Aggregate	e Year-to-Date ▼ 270.00]					
s	UBTOTAL of Receipts This Page (optional)			45.00					
Т	OTAL This Period (last page this line number o	nly)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			dress of any political committee to s	FOR LINE NUMBER: PAGE 56 / 60 (check only one) Image: Constraint of the second sec
<u> </u>	GENTIVA HEALTH SERVICES INC PA Full Name (Last, First, Middle Initial) Deborah Thompson Mailing Address 3 Huntington Quadrang Suite 200S			Date of Receipt 09 15 2006
	City Melville FEC ID number of contributing federal political committee.	State NY	Zip Code 11747	Transaction ID: SA11A1.4721 Amount of Each Receipt this Period 15.00
	Name of Employer Gentiva Health Services Inc. Receipt For: Primary General Other (specify) ▼	Occupatio Branch E Aggregate		Payroll Deduction \$15.00 Biweekly
в.	Full Name (Last, First, Middle Initial) Deborah Thompson Mailing Address 3 Huntington Quadrang Suite 200S City Melville FEC ID number of contributing federal political committee. Name of Employer Gentiva Health Services Inc. Receipt For:	State NY C Occupatio Branch D		Date of Receipt 09 / 29 / 2006 Transaction ID: SA11A1.4722 Amount of Each Receipt this Period 15.00 Payroll Deduction \$15.00 Biweekly
	Primary General Other (specify)	Aggregate	300.00	

SUBTOTAL of Receipts This Page (optional)	►				30.00
TOTAL This Period (last page this line number only)	►				7597.00

SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)		E NUMBER: PAGE 57 / 60				
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name							
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC G							
Α.	Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMIT Mailing Address P.O. Box 1444	TEE, THE		Transaction ID: Date of Disburse	ment			
		Ctata Zin Cada		Amount of Footb	Diekuwe en entathie Devied			
		State Zip Code TX 75120		Amount of Each	Disbursement this Period			
	Purpose of Disbursement Fundraising Expenses Candidate Name		003 Category/		2000.00			
	JOE L BARTON		Type					
	Office Sought: X House Disburse Senate President State: TX District: 06	ment For: 2006 Primary X General Other (specify) ▼						
_	Full Name (Last, First, Middle Initial)			Transaction ID:	SB23.4731			
В.	FRIENDS OF JAY ROCKEFELLER			Date of Disburse				
	Mailing Address PO BOX 1909							
		State Zip Code WV 25327		Amount of Each	Disbursement this Period			
	Purpose of Disbursement Fundraising Expenses		003		1000.00			
	Candidate Name JOHN DAVISON IV ROCKEFELLER		Category/ Type					
	Office Sought: House Disburse X Senate President	ment For: 2006 Primary X General Other (specify) ▼						
	State: WV District: 00 Full Name (Last, First, Middle Initial)			Transation ID.	CD00 4740			
C.	FRIENDS OF MAX BAUCUS			Transaction ID: Date of Disburse	ment			
	Mailing Address PO BOX 586			09 2				
		State Zip Code MT 59624		Amount of Each	Disbursement this Period			
	Purpose of Disbursement Fundraising Expenses		003	L	2500.00			
	Candidate Name MAX BAUCUS		Category/ Type					
	Office Sought: House Disburse X Senate President	ment For: 2006 Primary X General Other (specify) ▼						
_	State: MT District: 00							
s	UBTOTAL of Disbursements This Page (optional) .				5500.00			
Т	OTAL This Period (last page this line number only)		►					

SCHEDULE B (FEC Form 3X)		erate schedule(s)			R LINE NUMBER: PAGE 58 /					
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	
	y Information copied from such Reports and Stat for commercial purposes, other than using the na									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC	C GENTIVA	PAC							
<u>к</u> .	Full Name (Last, First, Middle Initial) HEATHER WILSON FOR CONGRESS						Disburs	SB23.4 ement		Y Y
	Mailing Address P.O. BOX 14070 P.O. BOX 14070					· · ·			· ·	
	City ALBUQUERQUE	State NM	Zip Code 87191			Amoun	t of Each	Disburse		
	Purpose of Disbursement Fundraising Expenses				003			<u> </u>	100	0.00
	Candidate Name HEATHER A. WILSON				ategory/ Type					
	Office Sought: X House Disbu Senate President State: NM District: 01	rsement For: Primary Other (spe	2006 X General ecify) ▼							
в.	Full Name (Last, First, Middle Initial) HEATHER WILSON FOR CONGRESS					Date of	Disburs		741	
	Mailing Address P.O. BOX 14070 P.O. BOX 14070					0 [°] 9	/ ^D 1	B / Y	20	Ď6Ŭ
	City ALBUQUERQUE	State NM	Zip Code 87191			Amoun	t of Each	Disburse		
	Purpose of Disbursement Fundraising Expenses		003						200	0.00
	Candidate Name HEATHER A. WILSON				ategory/ Type					
	Office Sought: X House Disbu Senate President State: NM District: 01	rsement For: Primary Other (spe	2006 X General ecify) ▼							
C.	Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS COMMIT	TEE					ction ID: Disburs	: SB23.4 ement	736	
	Mailing Address Post Office Box 52956 333 Texas Street Suite 1900					0 ^M 9 ^M	[′] ^D C	7	20	Ď6 [°]
	City Shreveport	State LA	Zip Code 71135			Amoun	t of Each	Disburse	ment th	is Period
	Purpose of Disbursement Fundraising Expenses				003				200	0.00
	Candidate Name MCCRERY FOR CONGRESS COMMIT	TEE			ategory/ Type					
	Office Sought: X House Disbu Senate President State: LA District: 04	rsement For: X Primary Other (spe	2006 General ecify) ▼							
s	UBTOTAL of Disbursements This Page (optional	al)			►				500	0.00
	OTAL This Period (last page this line number or									
FEC	Schedule B (Form 3X) Rev. 02/2003									

	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 59 / 60								
IT	EMIZED DISBURSEMENT	S for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b								
	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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 IN	C PAC GENTIVAPAC										
Α.	Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS CO	MMITTEE	Transaction ID: SB23.4740 Date of Disbursement									
	Mailing Address Post Office Box 5 333 Texas Street			0 9 ^M / 0 7 / 2 0 0 6 ^Y								
	City Shreveport	State Zip Code LA 71135		Amount of Each Disbursement this Period								
	Purpose of Disbursement Fundraising Expenses		003	2500.00								
	Candidate Name JAMES OTIS III MCCRERY		Category/ Type									
	Office Sought: X House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼										
	State: LA District: 04											

SUBTOTAL of Disbursements This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)	►	13000.00
FEC Schedule B (Form 3X) Rev. 02/2003		

Image# 27930473493

Form/Schedule: **SB23** Transaction ID: **SB23.4742** Transaction ID: **SB23.4742** Transaction ID: **SB23.4742** This amended report is in response to a March 9, 2007 inquiry from the FEC. We have amended the original report to reclassify five of the candidate contributions we made. Due to a clerical error, these contributions were originally reported as relating to the 2006 primary elections. This has been corrected to indicate the contributions are for the 2006 general election.