



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="47210.27"/>	<input type="text" value="47210.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="28515.59"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3765.20"/>	<input type="text" value="19225.80"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="32280.79"/>	<input type="text" value="66436.07"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="- 3041.49"/>	<input type="text" value="31113.79"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="35322.28"/>	<input type="text" value="35322.28"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	3323.00	17337.00
(ii) Unitemized .....	442.20	1888.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3765.20	19225.80
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3765.20	19225.80
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3765.20	19225.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3765.20	19225.80

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	258.51	513.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	258.51	513.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 3300.00	28600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	- 3041.49	31113.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	- 3041.49	31113.79

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3765.20	19225.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3765.20	19225.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	258.51	513.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	258.51	513.79

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Aurelio, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1104 Wickford Court  
 City Keller State TX Zip Code 76248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP, Region Ops KAH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 06 / 2021  
**Transaction ID : SA11AI.8054**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 PR Deduction (\$40.00 Bi-Weekly)

**B. Beasley, Selece Yvonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 974 Hearthstone Place  
 City Stone Mountain State GA Zip Code 30083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP Chief Compl Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8055**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PR Deduction (\$20.00 Bi-Weekly)

**C. Carr, Ginger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 S Stone Bridge Rd  
 City Fayetteville State AR Zip Code 72701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Branch Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 06 / 2021  
**Transaction ID : SA11AI.8059**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 PR Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Causby, David, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Heatherwood Way  
 City Roswell State GA Zip Code 30075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8060**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 PR Deduction (\$100.00 Bi-Weekly)

**B. Cundiff, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4301 San Marcos Rd.  
 City Louisville State KY Zip Code 40299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) AVP Operations HH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 06 / 2021  
**Transaction ID : SA11AI.8064**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 PR Deduction (\$25.00 Bi-Weekly)

**C. Dolin, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 Ashton Woods Ct  
 City Mt Holly State NC Zip Code 28120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP, CAO, KAH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8065**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 PR Deduction (\$30.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	595.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Downing, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2405 Cardinal Way  
 City Tucker State GA Zip Code 30084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8066**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 PR Deduction (\$50.00 Bi-Weekly)

**B. Elkin, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 Red Robin Lane  
 City Vonore State TN Zip Code 37885  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Enterprise Sls Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8067**  
 Amount of Each Receipt this Period 160.00  
 Memo Item  
 PR Deduction (\$40.00 Bi-Weekly)

**C. Hughes, Jackie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5236 W Alameda Rd  
 City Glendale State AZ Zip Code 85310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) RVP Financial Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8072**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PR Deduction (\$20.00 Bi-Weekly)

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Johnson, Dean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2000 Grande Loch  
 City Roswell State GA Zip Code 30075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) EVP Chief Commerical Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8074**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 PR Deduction (\$100.00 Bi-Weekly)

**B. Knight, Rebecca, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3048 Steel Creek Rd  
 City Georgetown State MS Zip Code 39078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Operations HH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 06 / 2021  
**Transaction ID : SA11AI.8076**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 PR Deduction (\$40.00 Bi-Weekly)

**C. Mascardi, Rosa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1412 Green Edge Trl  
 City Wake Forest State NC Zip Code 27587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Sales KAH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8079**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PR Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	620.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Mathews, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3205 Cumberland Blvd  
 Unit 308  
 City Atlanta State GA Zip Code 30339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Corporate HR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8080**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 PR Deduction (\$50.00 Bi-Weekly)

**B. Nordman, Derek, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1906 Skybrooke Lane  
 City Hoschton State GA Zip Code 30548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP CCO KAH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8085**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PR Deduction (\$20.00 Bi-Weekly)

**C. O'hara, Laurie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 702 Woodcrest Dr.  
 City Winston Salem State NC Zip Code 27104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Sales KAH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8086**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PR Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	360.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Shoemaker, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2950 Mt Wilkinson Parkway #815  
 City Atlanta State GA Zip Code 30339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8094**  
 Amount of Each Receipt this Period 160.00  
 Memo Item  
 PR Deduction (\$40.00 Bi-Weekly)

**B. Snyder, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2805 King Arthur Blvd  
 City Lewisville State TX Zip Code 75056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP, Region Ops KAH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8095**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 PR Deduction (\$100.00 Bi-Weekly)

**C. Stengle, Nikolas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1730 Wind Haven Way  
 City Vienna State VA Zip Code 22182  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) EVP Chief Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 08 / 13 / 2021  
**Transaction ID : SA11AI.8096**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 PR Deduction (\$5.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	580.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Trail, Mikel, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4850 Payson Terr SE

City Atlanta	State GA	Zip Code 30339
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) DVP HR Employee Services
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.00

Date of Receipt  
08 / 13 / 2021  
**Transaction ID : SA11AI.8098**

Amount of Each Receipt this Period  
160.00

Memo Item  
PR Deduction (\$40.00 Bi-Weekly)

**B. Waller, Julie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 998 Danbury Court

City Eagan	State MN	Zip Code 55123
---------------	-------------	-------------------

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

Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) RVP Human Resources
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  
08 / 13 / 2021  
**Transaction ID : SA11AI.8100**

Amount of Each Receipt this Period  
104.00

Memo Item  
PR Deduction (\$26.00 Bi-Weekly)

**C. Wandstrat, Scott, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 Ansley Street

City Decatur	State GA	Zip Code 30030
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) VP Chief Lit Officer
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
816.00

Date of Receipt  
08 / 13 / 2021  
**Transaction ID : SA11AI.8101**

Amount of Each Receipt this Period  
204.00

Memo Item  
PR Deduction (\$51.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	468.00
<b>TOTAL</b> This Period (last page this line number only).....	3323.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>			Date of Disbursement MM / DD / YYYY 07 / 15 / 2021	
Mailing Address PO Box 31900				
City Tampa	State FL	Zip Code 33631-3900	FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8045</b> Amount of Each Disbursement this Period [REDACTED] 48.49	
Purpose of Disbursement Bank service fee		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>			Date of Disbursement MM / DD / YYYY 08 / 16 / 2021	
Mailing Address PO Box 31900				
City Tampa	State FL	Zip Code 33631-3900	FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8046</b> Amount of Each Disbursement this Period [REDACTED] 42.48	
Purpose of Disbursement Bank service fee		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>			Date of Disbursement MM / DD / YYYY 09 / 15 / 2021	
Mailing Address PO Box 31900				
City Tampa	State FL	Zip Code 33631-3900	FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8047</b> Amount of Each Disbursement this Period [REDACTED] 42.79	
Purpose of Disbursement Bank service fee		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 133.76
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 31900

City  
Tampa

State  
FL

Zip Code  
33631-3900

Purpose of Disbursement  
Bank service fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2021

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.8048

Amount of Each Disbursement this Period

[Redacted] 41.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 31900

City  
Tampa

State  
FL

Zip Code  
33631-3900

Purpose of Disbursement  
Bank service fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2021

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.8049

Amount of Each Disbursement this Period

[Redacted] 41.46

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 31900

City  
Tampa

State  
FL

Zip Code  
33631-3900

Purpose of Disbursement  
Bank service fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2021

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.8103

Amount of Each Disbursement this Period

[Redacted] 41.64

Memo Item

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

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

[Redacted] 124.75

[Redacted] 258.51

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. CATHERINE CORTEZ-MASTO FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2021
Mailing Address 8020 SOUTH RAINBOW BLVD SUITE 100-112		FEC Identification Number C 000575548 <b>Transaction ID : SB23.8042</b>
City LAS VEGAS	State NV	Zip Code 89139
Purpose of Disbursement Contribution		Category/Type 011
Candidate Name <b>CORTEZ MASTO, CATHERINE, , ,</b>		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NV	District: 00	

Full Name (Last, First, Middle Initial) <b>B. TOGETHER HOLDING OUR MAJORITY PAC</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2021
Mailing Address PO BOX 97275		FEC Identification Number C 000571323 <b>Transaction ID : SB23.8044</b>
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement Void - Check dated 05.26.2021		Category/Type 011
Candidate Name		Amount of Each Disbursement this Period - 3000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. WARNOCK FOR GEORGIA</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2021
Mailing Address PO BOX 991		FEC Identification Number C 000736876 <b>Transaction ID : SB23.8043</b>
City DECATUR	State GA	Zip Code 30031
Purpose of Disbursement Void - Check dated 10.06.2020		Category/Type 011
Candidate Name <b>WARNOCK, RAPHAEL, , ,</b>		Amount of Each Disbursement this Period - 2800.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	<input type="checkbox"/> Memo Item
State: GA	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	- 3300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	- 3300.00