07/31/2007 16:22

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC 3 HUNTINGTON QUADRANGLE ADDRESS (number and street) SUITE 200S Check if different than previously **MELVILLE** NY 11747 4627 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE 🙏 IS THIS **AMENDED** NEW C00407080 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2007 06 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. John Potapchuk Type or Print Name of Treasurer Electronically Filed by John Potapchuk 07 3 1 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC D [®] D " D 0 1 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2007 22551.06 January 1 (b) Cash on Hand at 22551.06 Begining of Reporting Period 17066.00 17066.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 39617.06 39617.06 6(a) and 6(c) for Column B) 15501.01 15501.01 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 24116.05 24116.05 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

0 1 3^D0 м N 0 1 м м 0 6 2007 2007 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 13581.00 13581.00 (i) Itemized (use Schedule A) 3485.00 3485.00 (ii) Unitemized (iii) TOTAL (add 17066.00 17066.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 17066.00 17066.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 17066.00 17066.00 12, 13, 14, 15, 16, 17, and 18(c))

17066.00

17066.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: a) Shared Federal/Non-Federal		
(Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1.01	1.01
(Expenditures c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b))	1.01	1.01
	ransfers to Affiliated/Other Party	0.00	0.00
3. (Contributions to		
a	ederal Candidates/Committees Ind Other Political Committees	15500.00	15500.00
	ndependent Expenditure use Schedule E)	0.00	0.00
5. (Coordinated Expenditures Made by Party		
(Committees (2 U.S.C. 441a(d)) use Schedule F)	0.00	0.00
6. L	oan Repayments Made	0.00	0.00
	oans MadeRefunds of Contributions To:	0.00	0.00
(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
	Tarkers Floridae Auto (0.11.0.0.404/00))		
	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	2.22
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15501.01	15501.01
<u>)</u> .	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	from Line 31)	15501.01	15501.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17066.00	17066.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17066.00	17066.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1.01	1.01
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	1.01	1.01

S	CHEDULE A (FEC Form 3X)		Llac concrete cobodulo(a)	FOR LINE NUMBER: PAGE 6 / 18
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EIMIZED RECEIPTS		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 ado	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		moco or any pontion committee to	
$ \rangle$	GENTIVA HEALTH SERVICES INC PA	C GENTIV	A P A C	
	GENTIVA FILALITI GENTIGES INOT A	O GENTIV	AI AO	
_	Full Name (Last, First, Middle Initial)			
A.	James Andrews			Date of Receipt
	Mailing Address 3 Huntington Quadrangl	е		0 6 3 0 Y Y Y Y Y Y Y
	Suite 200S City	State	Zip Code	Transaction ID: SA11A1.4856
	Melville	NY	11747	
		INI	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
				Payroll Deduction - \$15.00
	Name of Employer Gentiva Health Services	Occupation		Biweekly
	Inc.	1	nancial Services Unit	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	225.00	
	Carlor (Specify)	1 1		1
_	Full Name (Last, First, Middle Initial)			
В.	John Aurelio			Date of Receipt
	Mailing Address 3 Huntington Quadrangl	е		M M / D D / Y Y Y Y Y
	Suite 200S City	State	Zip Code	06 30 2007
	Melville	NY	11747	Transaction ID: SA11A1.4857
		INI	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	<u> </u>			Payroll Deduction - \$15.00
	Name of Employer Gentiva Health Services	Occupation		Biweekly
	Inc.		VP Nursing Operations	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		225.00	
	care (epesity) •	1		1
	Full Name (Last, First, Middle Initial)			
C.	Brian Bacon			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S	е		06 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.4858
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		210.00
	Name of Freedom	10		Payroll Deduction - \$15.00
	Name of Employer Gentiva Health Services	Occupation Branch D		Biweekly
	Inc. Receipt For:		Year-to-Date V	-
	Primary General	, iggregate	Total to Date 🔻	1
	Other (specify)		210.00	
				1
s	UBTOTAL of Receipts This Page (optional)			660.00
\vdash	·		-	-

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 / 18
	•		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and Stator 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.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	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		06 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.4861
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Government Affairs	Payroll Deduction - \$25.00 Biweekly
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	375.00	1
	Other (specify)	0 0	0.0.00	J.
— В.	Full Name (Last, First, Middle Initial) Thomas Boelsen			Date of Receipt
	Mailing Address 3 Huntington Quadrang	le		M M / D D / Y Y Y Y
	Suite 200S			06 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.4862
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Gentiva Health Services	Occupation	1	Payroll Deduction - \$50.00 Biweekly
	Inc.	1	sident - CareCentrix	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, ,	350.00	1
	Other (specify)	0 0		1
<u> </u>	Full Name (Last, First, Middle Initial) Cindy Brown			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	le		06 30 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4865
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Gentiva Health Services Inc.	Occupation Branch D		Payroll Deduction - \$15.00 Biweekly
	Receipt For:		Year-to-Date ▼	7
	Primary General		205.00	1
	Other (specify) ▼		225.00	
_				
				050.00
S	UBTOTAL of Receipts This Page (optional)			950.00
				-

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 18
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any person dress of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\geq	GENTIVA HEALTH SERVICES INC PAC	GENTIV	APAC	
A.	Full Name (Last, First, Middle Initial) Bruce Carter			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S			0 6 3 0 Y Y Y Y Y Y
	City Melville	State NY	Zip Code 11747	Transaction ID: SA11A1.4871 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Contina Hoalth Convisors	Occupation RVP - Op	n perations	Payroll Deduction - \$20.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) Robert Creamer			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S			03 / 30 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.4879
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00 Payroll Deduction - \$30.00
	Centive Health Services	Occupation Senior Vi	n ce President Home Healthcar	Biweekly
	IIIO.		Year-to-Date ▼	1
	Primary General Other (specify) ▼	0 0	240.00	
<u> </u>	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S			06 30 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.4880
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00 Payroll Deduction - \$25.00
	Centive Health Services	Occupation /ice Pres	n sident Tax	Biweekly
	IIIO.		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	375.00	
s	UBTOTAL of Receipts This Page (optional)		·····	855.00
Т	OTAL This Period (last page this line number only))		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 18
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and addr	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GI		• •	
Α.	Full Name (Last, First, Middle Initial) Philip Feldman			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S			06 30 7 2007
	,	State NY	Zip Code 11747	Transaction ID: SA11A1.4888 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			225.00
	Contina Health Consider	ccupation VP Final	ncial Operations	Payroll Deduction - \$15.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 225.00	
В.	Full Name (Last, First, Middle Initial) Mary Jalwan Mailing Address 3 Huntington Quadrangle			Date of Receipt
	Suite 200S	<u> </u>		06 30 2007
	•	State	Zip Code	Transaction ID: SA11A1.4904
	Melville FEC ID number of contributing federal political committee.	NY C	11747	Amount of Each Receipt this Period 300.00
	Contina Health Consider	ccupation VP Sale	S	Payroll Deduction - \$20.00 Biweekly
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 300.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Joanne Kassebaum			Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S			06 30 7 2007
	,	State NY	Zip Code 11747	Transaction ID: SA11A1.4910 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			600.00
	Gentiva Health Services AV	ccupation VP - Ma		Payroll Deduction - \$40.00 Biweekly
	Receipt For: Primary Other (specify) ▼ Ag General	ggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)			1125.00
 -	OTAL This Period (last nage this line number only)		·	

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 / 18
	•		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny 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.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	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		06 30 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.4915
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		495.00
	Name of Employer Gentiva Health Services Inc.	Occupation VP - Fina	n nncial Operations	Payroll Deduction - \$33.00 Biweekly
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	495.00	
	Other (specify)		1 1 1 1 1 1 1 1	J.
В.	Full Name (Last, First, Middle Initial) JoAnne Little			Date of Receipt
	Mailing Address 3 Huntington Quadrang	le		M M / D D / Y Y Y Y
	Suite 200S			06 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.4916
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		390.00
	Name of Employer Gentiva Health Services	Occupation	า	Payroll Deduction - \$30.00 Biweekly
	Inc.	Asst Gen	eral Counsel	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	390.00	1
	Other (specify)	1 1		J.
<u> </u>	Full Name (Last, First, Middle Initial) Daniel Locker			Date of Receipt
	Mailing Address 3 Huntington Quadrang Suite 200S	le		06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4917
	Melville	NY	11747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		231.00
	Name of Employer Gentiva Health Services Inc.	Occupation Regional	n Vice President Sales	Payroll Deduciton - \$38.50 Biweekly
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		231.00	1
	Other (specify)		231.00	
_				
				1116.00
S	UBTOTAL of Receipts This Page (optional)			1110.00
1				

SCHEDULE A (FEC Form 3X)

PAGE 11/18 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Date of Receipt Kevin Marrazzo Mailing Address 3 Huntington Quadrangle 0.4 2007 25 Suite 200S Zip Code City State Transaction ID: SA11A1.4918 Melville NY 11747 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Gentiva Health Services Occupation Assistant Vice President Legal Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn McGuire Date of Receipt Mailing Address 3 Huntington Quadrangle 0 6 30 2007 Suite 200S City Zip Code State Transaction ID: SA11A1.4922 Melville NY 11747 Amount of Each Receipt this Period FEC ID number of contributing C 375.00 federal political committee. Payroll Deduction - \$25.00 Biweekly Name of Employer Gentiva Health Services Occupation Branch Director Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mary Muchow Date of Receipt Mailing Address 3 Huntington Quadrangle 06 30 2007 Suite 200S Citv State Zip Code Transaction ID: SA11A1.4923 <u>Me</u>lville NY Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Payroll Deduction - \$20.00 Biweekly Name of Employer Gentiva Health Services Occupation Director, Clinical Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 925.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 18	
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12	
			Detailed Summary Page	13 14 15 16 17	7
Ar	y information copied from such Reports and Statem for commercial purposes, other than using the name	nents may	not be sold or used by any perso	n for the purpose of soliciting contributions	
7	NAME OF COMMITTEE (In Full)	- una da	mose of any pointour committee to	00.01, 00.11.120.10.10.11.00.10.00.10.11.11.11.10.10	_
\geq	GENTIVA HEALTH SERVICES INC PAC O	BENTIV	APAC		
Α.	Full Name (Last, First, Middle Initial) Stephen Paige			Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S			0 6 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
		State NY	Zip Code 11747	Transaction ID: SA11A1.4929	
	FEO ID worth and Constitution	C	11/4/	Amount of Each Receipt this Period 900.00	
	Gentiva Health Services	ccupation	n ce Preisdent/General Couns	Payroll Deduction - \$60.00 Biweekly	
	inc.		Year-to-Date ▼ 900.00		
В.	Full Name (Last, First, Middle Initial) Susan Sender			Date of Receipt	_
	Mailing Address 3 Huntington Quadrangle Suite 200S			06 30 7 2007	
	,	State	Zip Code	Transaction ID: SA11A1.4942	
		NY	11747	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Contina Hoalth Sorvings	ccupation P & Chi	n ef Nursing Executive	Payroll Deduction - \$20.00 Biweekly	
		Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	300.00		
<u>с.</u>	Full Name (Last, First, Middle Initial) Todd Sexe			Date of Receipt	
	Mailing Address 3 Huntington Quadrangle Suite 200S			06 30 7 2007	
	•	State NY	Zip Code 11747	Transaction ID: SA11A1.4943	
	FEO ID combined (contribution		11747	Amount of Each Receipt this Period	
	federal political committee.	C ,		300.00 Payroll Deduction - \$20.00	
	Gentiva Health Services	ccupation P Home	n e Health Operations	Biweekly	
			Year-to-Date ▼		
	Primary General Other (specify) ▼	1 1	300.00		
s	UBTOTAL of Receipts This Page (optional)			1500.00	
Т	OTAL This Period (last page this line number only)		>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 13 / 18 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Date of Receipt William Sowell, Jr. Mailing Address 3 Huntington Quadrangle 03 2007 05 Suite 200S Zip Code City State Transaction ID: SA11A1.4949 Melville NY 11747 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Gentiva Health Services Occupation VP - Provider Relations Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Anthony Strange Date of Receipt Mailing Address 3 Huntington Quadrangle 02 12 2007 Suite 200S City State Zip Code Transaction ID: SA11A1.4951 Melville NY 11747 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Gentiva Health Services Occupation Chief Operating Officer Inc. Receipt For: Aggregate Year-to-Date V Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Cynthia Thackston Date of Receipt Mailing Address 3 Huntington Quadrangle 06 30 2007 Suite 200S City State Zip Code Transaction ID: SA11A1.4954 <u>Me</u>lville NY Amount of Each Receipt this Period FEC ID number of contributing 225.00 C federal political committee. Payroll Deduction - \$15.00 Biweekly Name of Employer Gentiva Health Services Occupation Branch Director Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 6225.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 14/18 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) A. Deborah Thompson Date of Receipt Mailing Address 3 Huntington Quadrangle 06 30 2007 Suite 200S City Zip Code State Transaction ID: SA11A1.4955 Melville NY 11747 Amount of Each Receipt this Period FEC ID number of contributing C 225.00 federal political committee. Payroll Deduction - \$15.00 Biweekly Name of Employer Gentiva Health Services Occupation **Branch Director** Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	225.00
TOTAL This Period (last page this line number only)	•	13581.00

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s		NUMBER:	PAGE 15/18					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 28a 28b	24 25 26 28c 29 30k					
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n									
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIVAPAC								
Full Name (Last, First, Middle Initial) A. BEN CARDIN FOR SENATE Mailing Address PO BOX 65056 City S BALTIMORE Nurpose of Disbursement Fundraising Expenses Candidate Name			Transaction ID Date of Disburs						
			0 2 D	28 7 2007					
	State Zip Code MD 21209		Amount of Eacl	n Disbursement this Period					
		003		1000.00					
BENJAMIN L CARDIN		Category/ Type							
X Senate President	x Primary General Other (specify)								
Full Name (Last, First, Middle Initial)			Transaction ID	: SB23.4973					
COLLINS FOR SENATOR			Date of Disburs						
Mailing Address PO BOX 1096			0 4	03 2007					
City BANGOR Purpose of Disbursement	State Zip Code ME 04402		Amount of Each Disbursement this Period						
Fundraising Expenses Candidate Name		003 Category/		1000.00					
Office Sought: House X Senate President	x Primary General Other (specify) ▼	Туре							
Full Name (Last, First, Middle Initial) COLLINS FOR SENATOR			Transaction ID Date of Disburs	sement					
Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE Mailing Address PO BOX 65056 City BALTIMORE Purpose of Disbursement Fundraising Expenses Candidate Name BENJAMIN L CARDIN Office Sought: House			06 / 0	08					
President District: 00 Full Name (Last, First, Middle Initial) COLLINS FOR SENATOR Mailing Address PO BOX 1096 City BANGOR Purpose of Disbursement Fundraising Expenses	State Zip Code ME 04402	_	Amount of Eacl	n Disbursement this Period					
Fundraising Expenses		003		2500.00					
SUSAN M COLLINS		Category/ Type							
X Senate	x Primary								
State: ME District: 00									
SUBTOTAL of Disbursements This Page (option	al)	>		4500.00					
TOTAL This Period (last page this line number of	alv)								

SCHEDULE B (FEC Form 3X)

S	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		FOR LINE	-	R:	PA	AGE	16 / 1	8
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		(check on 21b 27	ly one) 22 28a	X 23 28b	24 28c	Н	25 29	26 30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name										5
\rangle	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC C			-							
۹.	Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMIT	TEE, THE					of Disbur			0 ŏ 7	Y
	Mailing Address P.O. Box 1444					0.0				007	
	Ennis	State TX	Zip Code 75120			Amou	int of Eac	h Disburse	-		
	Purpose of Disbursement Fundraising Expenses				003				1	500.0	10
	Candidate Name JOE L BARTON				ategory/ Type						
	Senate X President	ment For: Primary Other (spe	2008 General cify) ▼								
	State: TX District: 06 Full Name (Last, First, Middle Initial)					T		N ODOO 4	000		
3.	ENGEL FOR CONGRESS					Date	of Disbur			V *	V
	Mailing Address 462 California Road					0 2		27	2	0 ŏ 7	
	,	State NY	Zip Code 10708			Amou	ınt of Eac	h Disburse			-
	Purpose of Disbursement Fundraising Expenses				003	L.			1	000.0	00
	Candidate Name ELIOT ENGEL				ategory/ Type						
	-	ment For: Primary Other (spe	2008 General cify) ▼								
Э.	Full Name (Last, First, Middle Initial) ENGEL FOR CONGRESS					1	saction II of Disbur	D: SB23.4 sement	976		
	Mailing Address 462 California Road					0 ^M 5	M / D	18	ž	0 ŏ 7	Y
		State NY	Zip Code 10708			Amou	int of Eac	h Disburse	ement	this P	eriod
	Purpose of Disbursement Fundraising Expenses			Г	003	<u> </u>			1	000.0	00
	Candidate Name ELIOT ENGEL				ategory/ Type						
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S	UBTOTAL of Disbursements This Page (optional) .				▶				35	500.0	0
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SCHEDULE B (FEC Form 3X)

TEMIZED DISDUDOFMENTS	Use seperate schedule(s)		heck or	E NOM	ocn.		L P A	NGE	17 / 1	<u> </u>
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28:	a 🗆	23 28b	24 28c	П	25 29	
Any Information copied from such Reports and State										3
or for commercial purposes, other than using the na	me and address of any political co	וווווווו	ilee io s	Olicit CO	HIHDL	JUONS ITC	om such (COIIII	iiilee	
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC	GENTIVAPAC									
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB23.4	970		
FRIENDS OF JAY ROCKEFELLER				Dat		Disburse		v v	V .	V
Mailing Address PO BOX 1909				O	2 "	2	8 /	2	0 ŏ 7	
City CHARLESTON	State Zip Code WV 25327			Am	ount	of Each	Disburse	-		-
Purpose of Disbursement	Г							_ 1	000.0	0
Fundraising Expenses Candidate Name		00 Cate								
JOHN DAVISON IV ROCKEFELLER		Тур								
Office Sought: House Disbu X Senate President	xsement For: 2008 X Primary General Other (specify)									
State: WV District: 00										
Full Name (Last, First, Middle Initial)							SB23.4	977		
FRIENDS OF MAX BAUCUS				Dat		Disburse		v v	V .	V
Mailing Address PO BOX 586				O		0	5 /	2	0 ŏ 7	
City HELENA	State Zip Code MT 59624			Am	ount	of Each	Disburse			
Purpose of Disbursement Fundraising Expenses		00	3		•			2	500.0	0
Candidate Name MAX BAUCUS		Cate Typ	•							
Office Sought: House X Senate President State: MT District: 00	rsement For: 2008 Primary X General Other (specify) ▼									
Full Name (Last, First, Middle Initial)				-		ID	0000 4	000		
LAMPSON FOR CONGRESS						Disburse	SB23.4 ement		V	V
Mailing Address P.O. Box 58606				0	2 "	1	3 /	2	0 ŏ 7	
City Houston	State Zip Code TX 77258			Am	ount	of Each	Disburse			
Purpose of Disbursement Fundraising Expenses		00	3		-			. 1	000.0	0
Candidate Name NICHOLAS LAMPSON		Cate Typ								
Office Sought: X House Senate President State: TX District: 22	x Primary General Other (specify)									
State. IA DISTITUT. 22										
SUBTOTAL of Disbursements This Page (optional	I)		•					4	500.0	0
TOTAL This Period (last page this line number or	IV)		•	1						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Use seperate schedule(s) for each category of the Detailed Summary Page 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 INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) A. LAMPSON FOR CONGRESS Transaction ID: SB23.4967 Date of Disbursement	
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 INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	
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 INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	26
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 INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	30b
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	
Full Name (Last, First, Middle Initial) Transaction ID: SB23.4967	
Transaction ib. Obzo.4307	
Transaction ib. Obzo.4307	
A. LAMPSON FOR CONGRESS Date of Disbursement	
Mailing Address P.O. Boy 58606 0 6 0 6 0 7 7 7 7 7 7 7 7 7 7 7 7 7	
Mailing Address P.O. Box 58606	
City State Zip Code Amount of Each Disbursement this Perio	
Houston TX 77258	\neg
Purpose of Disbursement 2000.00	
Fundraising Expenses 003	
Candidate Name Category/	
NICHOLAS LAMPSON Type	
Office Sought: X House Disbursement For: 2008	
Senate X Primary General	
President	
State: TX District: 22	
Full Name (Last, First, Middle Initial) Transaction ID: SB23.4972	
B. WHITFIELD FOR CONGRESS COMMITTEE Date of Disbursement	
Mailing Address P.O. BOX 391	
Mailing Address P.O. BOX 391	
City State Zip Code Amount of Each Disbursement this Perio	d
HOPKINSVILLE KY 42241	
Purpose of Disbursement 1000.00	
Fundraising Expenses 003	
Candidate Name ED WHITFIELD Type	
Турс	
Office Sought: X House Disbursement For: 2008	
Senate X Primary General President Other (specify) Other (specify)	
State: KY District: 01 Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	•	3000.00
TOTAL This Period (last page this line number only)	•	15500.00