FEC FORM 3X	AN	PORT OF D DISBU Other Than An	RSEME	INTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING LAE	-//00	nple:If typing the lines	, type			
	I SERVICES IN							
ADDRESS (number and s	street) 33		РКWҮ					
Check if different than previously reported. (ACC	ent L	JITE 1400 TLANTA			 .		30339 _	
2. FEC IDENTIFICAT		▼			s		ZIPCOD	E 🔺
C00407080]	3. IS THIS REPORT		NEW N) OR	X AME (A)	NDED	
July 15 Quarterly October 1 Quarterly January 3 Quarterly July 31 M Report(No Year Only	orts: Report(Q1) 5 Report(Q2) 5 Report(Q3) 1 Report(YE) iid-Year on-election	(d) 30-Day Post -Elect Report for th	in i	Ë.	12C)	Aug 2 Sep 2 Oct 20 General (12 Special (12 Runoff (30)	2(M9) (M9) (M10) (M10) (G) (G) (In the State of	Nov 20 (M11) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer		Fric Slusser	ny knowledge a	through nd belief it is			2010	2010
NOTE : Submission of f	alse, erroneous,	, or incomplete infor	mation may sub	ject the pers	on signing this	Report to the p	enalties of 2 U.S	.C 437g.
Office Use Only							FEC FORM (Rev. 12/200	

Image# 10930778595

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 26

\	Write or Type Committee Name GENTIVA HEALTH SERVICES INC PAC GE	NTIVAPAC	
ł	Report Covering the Period: From:	D D Y Y Y Y 01 2010	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 Y Y Y		17635.52
	(b) Cash on Hand at Begining of Reporting Period	17635.52]
	(c) Total Receipts (from Line 19)	34838.75	34838.75
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52474.27	52474.27
7.	Total Disbursements (from Line 31)	19167.30	19167.30
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33306.97	33306.97
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

FE6AN026

Image# 10930778596

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	(i) Itemized (use Schedule A)	21900.50	21900.50
	(ii) Unitemized	12938.25	12938.25
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🕨	34838.75	34838.75
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34838.75	34838.75
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
8.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
.	Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
' .	Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.)		
	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34838.75	34838.75
	Total Federal Receipts (subtract Line 18(c) from Line 19)	34838.75	34838.75

Image# 10930778597

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 26
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share 	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	167.30	167.30
(c) Total Operating Expenditures(add 21(a)(i), (a)(ii) and (b))	🕨 167.30	167.30
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
 Contributions to Federal Candidates/Committeesand Other Political Committees 	19000.00	19000.00
24. Independent Expenditure (use Schedule E)		0.00
 Coordinated Expenditures Made by Par Committees (2 U.S.C. 441a(d)) (use Schedule F) 		0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made 28. Refunds 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
29. Other Disbursements	0.00	0.00
 Federal Election Activity (2 U.S.C 431(2 (a) Shared Federal Election Activity 	20))	
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entire With Federal Funds	ely 0.00	0.00
(c) Total Federal Election Activity (adc Lines 30(a)(i), 30(a)(ii) and 30(b)	0.00	0.00
 Total Disbursements (add Lines 21(c), 23, 24, 25, 26, 27, 28(d), 29 and 30(c) 	10107.00	19167.30
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(from Line 31)	ⁱⁱ⁾ 19167.30	19167.30

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DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) of Disbursements

5 / 26

	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)	34838.75	34838.75
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	34838.75	34838.75
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	167.30	167.30
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	167.30	167.30

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 26 (check only one) X 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 16
	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may ne name and add	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC I	PAC GENTIV	APAC	
	Full Name (Last, First, Middle Initial) John Aurelio			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	У		M M / D D / Y Y Y Y 03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.5877
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		230.00
	Name of Employer Gentiva Health Services	Occupation	n VP Nursing Operations	payroll deduction \$40 biw- eekly
	Inc. Receipt For:	¥¥	e Year-to-Date	—
	Other (specify)	0 0	230.00]
	Full Name (Last, First, Middle Initial) Jeffrey Barr	1		Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	У		M M / D D / Y Y Y Y 0 3 3 1 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5880
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation AVP - Sa		payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
_	Full Name (Last, First, Middle Initial) Mara Benner			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	У		M M / D D / Y Y Y </td
	City	State	Zip Code	Transaction ID: SA11AI.5883
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1050.00
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	n sident Government Affairs	 payroll deduction \$150 bi- weekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1050.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1530.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 26 (check only one) X X 11a 113 14 15 16
	ny information copied from such Reports and r for commercial purposes, other than using t	I Statements may n he name and addre	ot be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC	PAC GENTIVA	PAC	
	Full Name (Last, First, Middle Initial) Joseph Bettini			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	vy		M M / D D / Y Y Y Y 03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.5886
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation Director Or	perations Development	payroll deduction \$50 biw- eekly
	Receipt For:	·	ear-to-Date V	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Robert Brunson	I		Date of Receipt
	Mailing Address 3350 Riverwood Pkv Ste 1400	vy		0 3 / 0 1 / Y Y Y Y 0 3 1 / 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5892
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		230.00
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Sale	s	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date 230.00	
_	Full Name (Last, First, Middle Initial) David Causby			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	vy		M M / D D / Y Y Y Y 03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.5900
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer Gentiva	Occupation VP - Opera	tions	payroll deduction \$100 bi- weekly
	Receipt For: Primary General Other (specify) ▼	·	ear-to-Date ▼ 520.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> I </u>		1000.00

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 26 (check only one) X X 11a 11b 11c 12 13 14 15 16 1
	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
	GENTIVA HEALTH SERVICES INC PA	AC GENTIV	APAC	
	Full Name (Last, First, Middle Initial) Douglas Dahlgard			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.5911
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period 245.00
	Name of Employer Gentiva Health Services Inc.	Occupation Vice Pres	ident Tax	payroll deduction \$35 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 245.00]
_	Full Name (Last, First, Middle Initial) John Destefanis			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / 0 1 / Y Y Y Y 031 / 2010
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5916
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer Gentiva	Occupation RVP - Ho		payroll deduction \$100 bi- weekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 500.00]
	Full Name (Last, First, Middle Initial) Indy Edwards			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5921
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 350.00
	Name of Employer Gentiva	Occupation AVP - Op		payroll deduction \$70 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 350.00]
Γ	I SUBTOTAL of Receipts This Page (optional)			1095.00

ľ	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 26 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may no name and addres	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	AC GENTIVAP	AC	
	Full Name (Last, First, Middle Initial) Dave Gieringer			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.5927
	Atlanta FEC ID number of contributing federal political committee.	GA C	30339	Amount of Each Receipt this Period 525.00
	Name of Employer Gentiva Health Services	Occupation Vice Presid	ent Acctg / Controller	payroll deduction \$75 biw- eekly
	Inc. Receipt For: Primary General Other (specify)	-	par-to-Date ▼ 525.00]
	Full Name (Last, First, Middle Initial) Michael Grieco			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.5932
	<u>Atlanta</u> FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period 210.00
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Finar	nce	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date 🔻 210.00]
_	Full Name (Last, First, Middle Initial) Nancy Guerland			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5934
	FEC ID number of contributing federal political committee.	C	30339	Amount of Each Receipt this Period 240.00
	Name of Employer Gentiva	Occupation AVP - Oper	ations	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date 240.00]
Γ	I SUBTOTAL of Receipts This Page (optional)			975.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 26 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 1
0 0	ny information copied from such Reports and St r for commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	AC GENTIV	APAC	
×	Full Name (Last, First, Middle Initial) John Hamilton			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.5940
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period 250.00
	Name of Employer Gentiva	Occupation VP - Com		payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00]
	Full Name (Last, First, Middle Initial) Timothy Hock Mailing Address 3350 Riverwood Pkwy			Date of Receipt
	Ste 1400			03 31 2010
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5946 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation AVP - Op		payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
	Full Name (Last, First, Middle Initial) Monica Hullinger			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M M / D D / Y Y Y Y <
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5950
	FEC ID number of contributing federal political committee.	C	30339	Amount of Each Receipt this Period 240.00
	Name of Employer Gentiva Health Services, Inc.	Occupation VP - Hom	ne Health Operations	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 240.00]
Γ	I SUBTOTAL of Receipts This Page (optional)			740.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 26 (check only one) X X 11a 13 14 15 16
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIVA	PAC	
	Full Name (Last, First, Middle Initial) Teresa Irish			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / 31 / Y Y Y Y 03 / 31
	City	State	Zip Code	Transaction ID: SA11AI.5952
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period
	Name of Employer Gentiva Health Services Inc.	Occupation AVP - Ope	erational Initiatives	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 1000.00]
_	Full Name (Last, First, Middle Initial) Jorie Jacobs			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / <u>31</u> / <u>2010</u>
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.5953 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation AVP - Ope	erations	 payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Mary Jalwan			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.5954
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period 340.00
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sales	3	payroll deduction \$60 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 340.00]
Γ	SUBTOTAL of Receipts This Page (optional)		\	1590.00

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 26 (check only one) X X 11a 11b 11c 13 14
	or for commercial purposes, other than using the	Statements may not be sold or used by any pers ne name and address of any political committee to	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC	PAC GENTIVAPAC	
. ×	Full Name (Last, First, Middle Initial) John Karr		Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	<i>l</i> y	03 31 2010
	City	State Zip Code	Transaction ID: SA11AI.5959
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Gentiva	Occupation VP - Compensation & Benefits	payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Lisa Kolbeck		Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	Ŋ	$\begin{array}{c c} M & M \\ 0 & 3 \end{array} \begin{array}{c} D & D \\ 3 & 1 \end{array} \begin{array}{c} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{array}$
	City	State Zip Code	Transaction ID: SA11AI.5965
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Gentiva	Occupation Operational Initiatives Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) James Lee III		Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	ſŷ	M M / D D / Y Y Y Y 03 31 2010
	City	State Zip Code	Transaction ID: SA11AI.5968
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Gentiva	Occupation VP - Nat'l Accounts	eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1	1600.00

4				FOR LINE NUMBER: PAGE 13/26						
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)						
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Г				13 14 15 16 17						
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma name and ad	ay not be sold or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
	GENTIVA HEALTH SERVICES INC PA	C GENTIV	/APAC							
, ∠ A.	Full Name (Last, First, Middle Initial) JoAnne Little			Date of Receipt						
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D Y						
	City	State	Zip Code	Transaction ID: SA11AI.5971						
	Atlanta	GA	30339	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		210.00						
	Name of Employer Gentiva Health Services	Occupatio	n	payroll deduction \$30 biw-						
	Gentiva Health Services Inc.		neral Counsel	eekiy						
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General		210.00							
	Other (specify) 🔻	0 0								
- B.	Full Name (Last, First, Middle Initial) Robert Little			Date of Receipt						
	Mailing Address 3350 Riverwood Pkwy Ste 1400			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 ·						
	City	State	Zip Code	Transaction ID: SA11AI.5972						
	Atlanta	GA	30339	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		224.00						
	Name of Employer Gentiva	Occupation RVP - Sa		payroll deduction \$40 biw- eekly						
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼		224.00]						
- C.	Full Name (Last, First, Middle Initial) Michele Lovato			Date of Receipt						
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 31 2010						
	City	State	Zip Code	Transaction ID: SA11AI.5973						
	Atlanta	GA	30339	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Gentiva	Occupatio Finance		payroll deduction \$50 biw- eekly						
	Receipt For:	-	e Year-to-Date 🔻							
	Primary General	00 - 0								
	Other (specify)	0 0	250.00							
Γ	SUBTOTAL of Receipts This Page (optional)			684.00						
F										
	TOTAL This Period (last page this line number of	oniy)								

ľ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate for each cate Detailed Sum	schedule(s) gory of the mary Page	COR LINE NUMBER: PAGE 14/26 check only one) 11a 11b 11c 12 X 11a 114 15 16 1
	Any information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or us name and address of any politi	sed by any person fo cal committee to soli	or the purpose of soliciting contributions citic contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC P	AC GENTIVAPAC		
	Full Name (Last, First, Middle Initial) Christopher Macinnis			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M / D D / Y
	City	State Zip Code		Transaction ID: SA11AI.5974
	Atlanta	GA 30339		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Gentiva	Occupation RVP - Operations		payroll deduction \$60 biw- eekly
	Receipt For:	Aggregate Year-to-Date ▼	,	
	Other (specify)		300.00	
	Full Name (Last, First, Middle Initial) Ronald Malone			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 0 3 31 2010
	City	State Zip Code		Transaction ID: SA11AI.5976
	Atlanta	GA 30339		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		950.00
	Name of Employer Gentiva Health Services Inc.	Occupation Chairman / Chief Execu	utive Officer	payroll deduction \$190 bi- weekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	950.00	
_	Full Name (Last, First, Middle Initial) Kevin Marrazzo			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 31 2010
	City	State Zip Code		Transaction ID: SA11AI.5978
	Atlanta	GA 30339		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Gentiva Health Services Inc.	Occupation Assistant Vice Presider	nt Legal	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
Γ	SUBTOTAL of Receipts This Page (optional)			2250.00

ľ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fc D	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 15 / 26 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not e name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC P	AC GENTIVAPA	С	
	Full Name (Last, First, Middle Initial) Robert Maynard			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400	1		03 / D D / Y Y Y Y 2010
	City		Zip Code	Transaction ID: SA11AI.5982
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation AVP - Operat	tions	payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 250.00]
-	Full Name (Last, First, Middle Initial) Barbara Moyer			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400	,		M M / D D / Y Y Y Y 03 31 2010
	City		Zip Code	Transaction ID: SA11AI.5991
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation AVP - Sales		 payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 250.00]
-	Full Name (Last, First, Middle Initial) Constance Mrosek	1		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 31 2010
	City <u>Atlanta</u>	State GA	Zip Code 30339	Transaction ID: SA11AI.5992
	FEC ID number of contributing federal political committee.	C	30339	Amount of Each Receipt this Period 250.00
	Name of Employer Gentiva	Occupation AVP - Operat	tions	payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Year		
	SUBTOTAL of Receipts This Page (optional)	1		750.00

Ar		Detailed Summary Page	X 11a 11b 11c 12
	for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to so	13 14 15 16 17 for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	C GENTIVAPAC	
 A.	Full Name (Last, First, Middle Initial) Karen Negri		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		03 / ^D D / ^Y Y Y Y Y 2010
	City	State Zip Code	Transaction ID: SA11AI.5997
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Gentiva	Occupation AVP - Sales	payroll deduction \$100 bi- weekly
	Receipt For:	Aggregate Year-to-Date ▼ 500.00	
— 3.	Full Name (Last, First, Middle Initial) Stephen Paige		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 03 / 31 / 2010
	City	State Zip Code	Transaction ID: SA11AI.6005
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	420.00
	Name of Employer Gentiva Health Services Inc. Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice Preisdent/General Counsel Aggregate Year-to-Date ▼ 420.00	payroll deduction \$60 biw- eekly I
 >.	Full Name (Last, First, Middle Initial) Todd Sexe Mailing Address 3350 Riverwood Pkwy Ste 1400		Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.6026
	Atlanta	GA 30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	240.00
	Name of Employer Gentiva Health Services Inc.	Occupation VP Home Health Operations	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
s	UBTOTAL of Receipts This Page (optional)	•	1160.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 26 (check only one) 11a X 11a 13 14 15 16
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	v 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) GENTIVA HEALTH SERVICES INC PA	AC GENTIV	APAC	
۷ ۹.	Full Name (Last, First, Middle Initial) Jeff Shaner			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.6028
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Gentiva	Occupation Division	n VP of Operations	payroll deduction \$150 bi- weekly
	Receipt For:	1 1	Year-to-Date V	
	Primary General Other (specify) ▼		750.00	
-	Full Name (Last, First, Middle Initial) Paula Shoemaker			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y Y 03 / 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.6030
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer Gentiva	Occupation	n es Support & Marketing	payroll deduction \$40 biw- eekly
	Receipt For: Primary General Other (specify) ▼	1 -	Year-to-Date ▼ 210.00	1
-	Full Name (Last, First, Middle Initial) Eric Slusser			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 / 31 / 2010
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.6034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Gentiva	Occupation Treasure		payroll deduction \$100 bi- weekly
	Receipt For: Primary General Other (specify) ▼	1 · · · · · · · · · · · · · · · · · · ·	Year-to-Date V 500.00]
Γ	SUBTOTAL of Receipts This Page (optional)	I		1460.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 26 (check only one) X X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso lress of any political committee to	13 14 15 16 1 n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC P/	AC GENTIV	APAC	
۷ ۹.	Full Name (Last, First, Middle Initial) Eugenia Spencer			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M · M / D · D / Y · Y · Y · Y Y 0 3 3 1 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.6038
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation		payroll deduction \$50 biw- eekly
	Receipt For:	<u>₁ Ⅰ</u>	ared Svcs Year-to-Date V	
	Primary General Other (specify) ▼		250.00	
-	Full Name (Last, First, Middle Initial) Frederick Spight	1		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.6039
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Gentiva	Occupation AVP - Pu	rchasing & Supply Mgmt	 payroll deduction \$45 biw- eekly
	Receipt For:	1 1	Year-to-Date ▼ 225.00	
	Other (specify) 🔻	0 0		
	Full Name (Last, First, Middle Initial) Paul Stein Mailing Address 3350 Riverwood Pkwy			Date of Receipt
	Ste 1400	State	Zip Code	03312010 Transaction ID: SA11AI.6040
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Gentiva	Occupation VP - IS	1	payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	I		725.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 26 (check only one) X X 11a 11a 11b 113 14 15 16 1
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any persi ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
		PAC GENTIV	APAC	
	Full Name (Last, First, Middle Initial) Harmon Strange			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	у		03 / D D / Y Y Y Y 03 1 2010
	City	State	Zip Code	Transaction ID: SA11AI.6042
	Atlanta FEC ID number of contributing	GA	30339	Amount of Each Receipt this Period
	federal political committee.	C		961.50
	Name of Employer Gentiva Health Services	Occupation President		payroll deduction \$192.30 biweekly
	Inc. Receipt For:		Year-to-Date V	—
	Other (specify)		961.50	
_	Full Name (Last, First, Middle Initial) Pamela Teenier	I		Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	у		0 3 3 1 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.6046
	Atlanta FEC ID number of contributing	GA	30339	Amount of Each Receipt this Period
	federal political committee.	C		500.00
	Name of Employer Gentiva Health Services Inc.	1 1	Vice President Medicare O	ps
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 500.00]
_	Full Name (Last, First, Middle Initial) Gena Wagner			Date of Receipt
	Mailing Address 3350 Riverwood Pkw Ste 1400	у		M M / D D / Y Y Y Y 0 3 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.6053
	Atlanta FEC ID number of contributing	GA	30339	Amount of Each Receipt this Period
	federal political committee.	C		280.00
	Name of Employer Gentiva Health Services, Inc.	Occupation AVP - Op		payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 280.00]
Γ	SUBTOTAL of Receipts This Page (optional)			1741.50

ſ	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 26 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 1
	ny information copied from such Reports and S r for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC P/	AC GENTIV	APAC	
	Full Name (Last, First, Middle Initial) Charlotte Weaver			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			03 / D D / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: SA11AI.6055
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer Gentiva Health Services,	Occupation		 payroll deduction \$100 bi- weekly
	Inc. Receipt For:		nical Officer Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00]
	Full Name (Last, First, Middle Initial) Cheryl White			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.6057
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		270.00
	Name of Employer Gentiva	Occupation Area Dire	n ector Sales	payroll deduction \$50 biw- eekly
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 270.00]
	Full Name (Last, First, Middle Initial) Mary Wollstein			Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400			M M / D D / Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code	Transaction ID: SA11AI.6063
	<u>Atlanta</u>	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3000.00
	Name of Employer Gentiva	Occupation VP - Bus	n iness Initiatives	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 3000.00]
Γ	SUBTOTAL of Receipts This Page (optional)			3920.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PA	name and ad	dress of any political committee to	FOR LINE NUMBER: PAGE 21 / 26 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee. 17
Α.	Full Name (Last, First, Middle Initial) Douglas Wray Mailing Address 3350 Riverwood Pkwy Ste 1400 City Atlanta	State	Zip Code 30339	Date of Receipt 0 3 / 0 1 / 2 0 1 0 Transaction ID: SA11AI.6065 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Gentiva Receipt For: Primary General Other (specify) ▼	Occupatio AVP - Sa	n	payroll deduction \$50 biw-
В.	Full Name (Last, First, Middle Initial) Michael Young Mailing Address 3350 Riverwood Pkwy Ste 1400 City Atlanta FEC ID number of contributing federal political committee.	State GA	Zip Code 30339	Date of Receipt M M M / D D / Y Y Y Y 0 3 1 / 2 0 1 0 Transaction ID: SA11AI.6067 Amount of Each Receipt this Period 430.00
	Name of Employer Gentiva Health Services Inc. Receipt For: Primary General Other (specify)	Occupatio RVP - Sa Aggregate		 payroll deduction \$100 bi- weekly]

SUBTOTAL of Receipts This Page (optional)	►	680.00
TOTAL This Period (last page this line number only)	►	21900.50

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			NE NUMBER: PAGE 22 / 26 nnly one)							26	
	Detailed Summary Page			21b 27	22 28a	X	23 28b		24 28c		25 29	23
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name												6
NAME OF COMMITTEE (In Full)	and address of any pointed	5011				Jour	5115 11	Sint	540110	Jinit		
GENTIVA HEALTH SERVICES INC PAC G	ENTIVAPAC											
Full Name (Last, First, Middle Initial) SHELLEY BERKLEY						of Di	sburs	eme			-	
Mailing Address 3069 CONQUISTA COUF	RT.				0 3	М		2 9 2	/ Y	ž	οìα)
	State Zip Code NV 89121				Amou	int o	Each	ו Dis	burse	-		
Purpose of Disbursement		_	003	·	L.					50	00.00)
Candidate Name SHELLEY BERKLEY			tego Type									
President	nent For: 2010 Primary General Other (specify) ▼											
State: NV District: 01												
Full Name (Last, First, Middle Initial) SHELLEY BERKLEY					of Di	sburs	eme	-			X	
Mailing Address 3069 CONQUISTA COUF				0 3	М	D 2	2 ^D	/ Y	ž	0 ľ C)	
	State Zip Code NV 89121		Amount of Each Disbursement this Period									
Purpose of Disbursement		_	003		500.00)		
Candidate Name SHELLEY BERKLEY			tego Type									
	nent For: 2010 Primary X General Other (specify) ▼											
State: NV District: 01												
Full Name (Last, First, Middle Initial) DAVID LEE CAMP						of Di	sburs	eme	-		-	X
Mailing Address 5905 Wimbledon Ct.					0 ^M 3	M	D (0 3 [₽]	/ Y	ź	0 ľ C) [*]
	State Zip Code VI 48642				Amou	int of	Each	ו Dis	burse			
Purpose of Disbursement			003		L.					100	00.00	,
Candidate Name DAVID LEE CAMP			tego Type									
	nent For: 2010 Primary X General Other (specify) ▼											
State: MI District: 04												
SUBTOTAL of Disbursements This Page (optional)				•						200	0.00)
TOTAL This Period (last page this line number only) .				►								

FE6AN026

FEC Schedule B (Form 3X) (Revised 02/2003)

			for each category of the				NE NUMBER: PAGE 23 / 2 only one)						
			Summary Page			21b 27	22 28a	X	23 28b	24		25 29	20
Any Information copied from suc or for commercial purposes, other													
NAME OF COMMITTEE (In	Full)												
GENTIVA HEALTH SEF	VICES INC PAC	GENTIVAF	PAC										
Full Name (Last, First, Middl DAVID LEE CAMP	e Initial)								-	: SB2 ement	23.60	80	
Mailing Address 5905 V	Vimbledon Ct.						0 ^M 3	М	^D C) 3	Y	²́0ľ	0 [×]
City Midland		State MI	Zip Code 48642				Amou	int o	f Each	ı Disbu	-	-	
Purpose of Disbursement					003		L.				1	000.0	0
Candidate Name DAVID LEE CAMP					atego Type	-							
Office Sought: X Hous Sena Presi	dent X	ement For: Primary Other (spe	2010 General ecify) ▼										
State: MI District: Full Name (Last, First, Middl	-						T					05	
LOIS G CAPPS							Date	of Di	sburs	: SB2 ement			
Mailing Address 1724 SANTA BARBARA STREET							0 3	М	D 2	2 9 [/]	Y	ž01	0 ^Y
City SANTA BARBARA							Amount of Each Disbursement this Period						
Purpose of Disbursement		003								1	000.0	0	
Candidate Name LOIS G CAPPS						ory/ Ə							
Office Sought: X Hous Sena Presi	e X	ement For: C Primary Other (spe	2010 General cify) ▼										
State: CA District:	-												
Full Name (Last, First, Middl BENJAMIN L CARDIN	e miliai)								sburs	: SB2 ement			Y
Mailing Address PO BC	X 65056						01		1	8 /	L.	ž01	0
City BALTIMORE		State MD	Zip Code 21209				Amou	int o	f Each	i Disbu	seme	ent this	Period
Purpose of Disbursement					003	3	L.				1	000.0	0
Candidate Name BENJAMIN L CARDIN						ory/ Ə							
Office Sought: Hous X Sena Presi	e	ement For: Primary Other (spe	2012 X General ccify) ▼										
State: MD District:													
SUBTOTAL of Disbursements	This Page (optional)			<u></u>	<u></u>	►					3	0.000	0
TOTAL This Period (last page	this line number only)				•		Ū					
		,				-		0.5			_		

FE6AN026

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30					
Any Information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC	ne and address of any political	by any person fo committee to soli	or the purpose of soliciting contributions icit contributions from such committee					
Full Name (Last, First, Middle Initial) CHARLES E GRASSLEY	Transaction ID: SB23.6078 Date of Disbursement							
Mailing Address PO BOX 1000			$ \begin{array}{c} \stackrel{M}{0} \stackrel{M}{3} \stackrel{M}{1} \\ \end{array} \begin{array}{c} \stackrel{D}{0} \stackrel{D}{3} \\ \end{array} \begin{array}{c} \stackrel{D}{1} \stackrel{D}{3} \\ \end{array} \begin{array}{c} \stackrel{V}{2} \stackrel{V}{2} \stackrel{V}{1} \stackrel{V}{1} \\ \end{array} $					
City DES MOINES	StateZip CodeIA50304		Amount of Each Disbursement this Period					
Purpose of Disbursement		003	1000.00					
Candidate Name CHARLES E GRASSLEY		Category/ Type						
Office Sought: House Disburg X Senate President State: IA District: 00	sement For: 2010 Primary X General Other (specify) ▼							
Full Name (Last, First, Middle Initial) STENY HAMILTON HOYER			Transaction ID: SB23.6074 Date of Disbursement					
Mailing Address 4201 Northview Drive, S	Suite 307		$\begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix} \begin{bmatrix} I & D \\ 0 & 1 \end{bmatrix} \begin{bmatrix} D & I & D \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 0 & 1 \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y \end{bmatrix} \begin{bmatrix} Y & Y \\ 0 & Y $					
City Bowie	StateZip CodeMD20716		Amount of Each Disbursement this Period					
Purpose of Disbursement Candidate Name STENY HAMILTON HOYER		003 Category/	3500.00					
Office Sought: X House Disbur	sement For: 2010 K Primary General Other (specify) ▼	Туре						
Full Name (Last, First, Middle Initial) STENY HAMILTON HOYER			Transaction ID: SB23.6471 Date of Disbursement					
Mailing Address 4201 Northview Drive, S	Suite 307		$ \begin{array}{c} \begin{array}{c} M \\ 0 \end{array} \\ 1 \end{array} \\ \end{array} \\ \left(\begin{array}{c} D \\ 1 \end{array} \\ 1 \end{array} \\ \left(\begin{array}{c} D \\ 1 \end{array} \\ 1 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 2 \end{array} \\ \left(\begin{array}{c} Y \\ 2 \end{array} \\ 1 \end{array} \right) \\ Y \\ \end{array} \\ \left(\begin{array}{c} Y \\ 2 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 1 \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y $					
City Bowie	StateZip CodeMD20716		Amount of Each Disbursement this Period					
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SUBTOTAL of Disbursements This Page (optional)	····· •	9500.00					
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E6AN026			FEC Schedule B (Form 3X) (Revised					

Use separate schedule(s) for each category of the Detailed Summary Page Use separate 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 or for commercial purposes, other than using the name and address of any political committee to sold or used by any person. NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) JOHN H SR LEWIS Mailing Address 103 SEWANNEE AVE N W City State Zip Code ATLANTA GA 30314 Purpose of Disbursement 003 Category/ JOHN H SR LEWIS Disbursement For: 2010 Candidate Name Senate Primary General Office Sought: X House Disbursement For: 2010 X Primary General Other (specify) ▼	22 X 23 24 25 2 28a 28b 28c 29 3 for the purpose of soliciting contributions
or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC Full Name (Last, First, Middle Initial) JOHN H SR LEWIS Mailing Address 103 SEWANNEE AVE N W City State Zip Code ATLANTA GA 30314 Purpose of Disbursement Candidate Name JOHN H SR LEWIS Office Sought: X House Disbursement For: 2010 Senate X Primary General	Transaction ID: SB23.6075 Date of Disbursement 0 2 4 7 0 5 7 2 0 1 0 Max 2 0 5 7 2 0 1 0 Amount of Each Disbursement this Period
JOHN H SR LEWIS Mailing Address 103 SEWANNEE AVE N W City State Zip Code ATLANTA GA 30314 Purpose of Disbursement 003 Candidate Name Od3 JOHN H SR LEWIS Category/ Office Sought: X X House Disbursement For: 2010 X Primary	Date of Disbursement 0 2 ^M / 0 5 / Y 2 0 1 0 Amount of Each Disbursement this Period
City ATLANTA State GA Zip Code 30314 Purpose of Disbursement 003 Candidate Name JOHN H SR LEWIS 003 Office Sought: X Y House Senate X Y General	Amount of Each Disbursement this Period
Candidate Name JOHN H SR LEWIS 003 Category/ Type Office Sought: X Y House Disbursement For: 2010 X Primary General	500.00
Office Sought: X House Disbursement For: 2010 Senate X Primary General	-
President Other (specify) State: GA District: 05	
Full Name (Last, First, Middle Initial) JOHN H SR LEWIS	Transaction ID: SB23.6076 Date of Disbursement 0 2 1 9 / 2 0 1 0
Mailing Address 103 SEWANNEE AVE N W	
City State Zip Code ATLANTA GA 30314 Purpose of Disbursement Image: Contemport of Contem	Amount of Each Disbursement this Period 500.00
Candidate Name 003 JOHN H SR LEWIS Type	
Office Sought: X House Disbursement For: 2010 Senate Primary X General President Other (specify) ▼	-
Full Name (Last, First, Middle Initial) PATTY MURRAY	Transaction ID: SB23.6081 Date of Disbursement
Mailing Address PO BOX 3662	
City State Zip Code SEATTLE WA 98124	Amount of Each Disbursement this Period
Purpose of Disbursement 003 Candidate Name PATTY MURRAY Category/ Type	2500.00
Office Sought: House Disbursement For: 2010 X Senate Yrimary General President Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	3500.00
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FEC Schedule B (Form 3X) (Revised 02/2003)

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	NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES IN	IC PAC G	ENTIVAF	PAC													
Α.	 Full Name (Last, First, Middle Initial) PAT ROBERTS Mailing Address PO BOX 15								Trans Date 0 [™] 2	of Di	sburs	-	B23.6 nt / Y		7 0 1 0	Y	
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