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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For (Other Thai	n An Authoria	zed Commi	ittee		Office Use (Only	
NAME OF COMMITTEE (in formal contents)		E OR PRINT		Example: If ty over the lines		12FE4M	[5		
GENTIVA HEAL	_TH SERV	ICES INC	PAC GEN	TIVAPAC	1 1 1 1 1	1 1 1 1			
ADDRESS (number and		350 RIVERWO	OOD PARKWAY,	SUITE 1400					
Check if differ than previous reported. (AC	ly A	TLANTA				GA	30339		
2. FEC IDENTIFICA	TION NUMBI	ER ▼	CITY 🛦			STATE A	ZII	P CODE 4	\
C C00407080			3. IS THI REPO		NEW (N) OR	AN (A	MENDED)		
4. TYPE OF REPO (Choose One) (a) Quarterly Repo	- (b) Monthly Report Due On:	Feb 20 (I Mar 20 (I Apr 20 (I	M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	(Non- Year Dec (Non- Year	20 (M11) -Election Only) 2 20 (M12) -Election Only) 31 (YE)
July 15 Quarterly October 1			Election rt for the:	Primary (1		General Special		Run	off (12R)
January 3	Report (Q3) 31 Report (YE)		Election on	M = M	/ D D /	YIYIY		the tate of	
Year Only	lon-election () (MY)		T-Election x	General (3	30G)	Runoff (30R)	Spe	cial (30S)
Termination (TER)	on Report		Election on	11	03	2020		the tate of	
5. Covering Period	10	15	2020	through	n 11	23	2020	T Y	
I certify that I have exactly a property of Print Name of	D	eport and to owning, Chris	the best of my later topher, , ,	knowledge an	d belief it is tr	ue, correct an	d complete.		
Signature of Treasurer	Downing, (Christopher, , ,		[Electronic	ally Filed] [Date 12	/ 02		20
NOTE: Submission of fa	lse, erroneous,	or incomplete	e information may	subject the p	person signing t	his Report to t	he penalties	of 52 U.S.	C. § 30109
Office Use								FORM 3	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

10 15 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 65168.29 January 1, 2020 (b) Cash on Hand at 55517.91 Beginning of Reporting Period..... 11153.65 39813.45 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 104981.74 66671.56 6(a) and 6(c) for Column B)..... 17588.93 55899.11 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 49082.63 49082.63 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY 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. 05/2016)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

(other than loans) From: s/Persons Other tical Committees ed (use Schedule A) nized L (add 11(a)(i) and (ii) Party Committees itical Committees PACs) tributions (add Lines (b), and (c)) (Carry Line 33, page 5) In Affiliated/Other ees eived eived erating Expenditures sates, etc.) o Line 37, page 5)	10648.00 505.65 11153.65 0.00 11153.65 0.00 0.00 0.00	35854.00 3959.45 39813.45 0.00 39813.45 0.00 0.00
tical Committees ed (use Schedule A) nized	505.65 11153.65 0.00 11153.65 1100 0.00 0.00 0.00 0.00	3959.45 39813.45 0.00 0.00 39813.45 0.00
ed (use Schedule A) nized	505.65 11153.65 0.00 11153.65 1100 0.00 0.00 0.00 0.00	3959.45 39813.45 0.00 0.00 39813.45 0.00
nized	505.65 11153.65 0.00 11153.65 1100 0.00 0.00 0.00 0.00	3959.45 39813.45 0.00 0.00 39813.45 0.00
L (add 11(a)(i) and (ii)	11153.65 0.00 0.00 11153.65 0.00 0.00	39813.45 0.00 0.00 39813.45 0.00
Party Committees	0.00 0.00 11153.65 0.00 0.00	0.00 0.00 39813.45 0.00 0.00
itical Committees PACs) tributions (add Lines (b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures pates, etc.) o Line 37, page 5)	0.00 11153.65 0.00 0.00	0.00 39813.45 0.00 0.00
PACs) tributions (add Lines (b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures eates, etc.) o Line 37, page 5)	0.00 0.00 0.00	0.00 0.00
tributions (add Lines (b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures eates, etc.) o Line 37, page 5)	0.00 0.00 0.00	0.00 0.00
(b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures eates, etc.) o Line 37, page 5)	0.00	0.00
Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures rates, etc.) o Line 37, page 5)	0.00	0.00
eivedeived Expenditures eates, etc.) o Line 37, page 5)	0.00	0.00
ees eived ents Received erating Expenditures eates, etc.) o Line 37, page 5)	0.00	0.00
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erating Expenditures vates, etc.) o Line 37, page 5)	0.00	
ates, etc.) o Line 37, page 5)	0.00	
o Line 37, page 5)	0.00	
	0.00	0.00
ontributions Made	4 4	4 4
ndidates and Other		
nittees	0.00	0.00
Receipts	7 7	
erest, etc.)	0.00	0.00
Non-Federal and Levin Funds $^{ m I}$	4 4	4 4
al Account		
edule H3)	0.00	0.00
ds (from Schedule H5)	0.00	0.00
,	4 4	
sfers (add 18(a) and 18(b))	0.00	0.00
	terest, etc.)	n Non-Federal and Levin Funds ral Account nedule H3)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 		Caronaa Toal to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	20.00	200.44
Expenditures(c) Total Operating Expenditures	88.93	299.11
(add 21(a)(i), (a)(ii), and (b))▶	88.93	299.11
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	7500.00	44600.00
Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans 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
Other Disbursements (Including		
Non-Federal Donations)	10000.00	11000.00
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) "Lovin" Chara		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
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))		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17588.93	55899.11
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	17588.93	55899.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	11153.65	39813.45
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11153.65	39813.45
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	88.93	299.11
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	88.93	299.11

F	OR	LINE	NU	MBER	:	PAGE		6	OF	19
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	INC PAC GENTIVAPAC	
Full Name of Individual (Last, First, Middle Ini Aurelio, John, , , Mailing Address 1104 Wickford Court	tial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 13 2020 Transaction ID : SA11AI.7823
Keller FEC ID number of contributing	TX 76248	Amount of Each Receipt this Period
federal political committee.	[C]	120.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home Receipt For:	Occupation (for Individual) SVP, Region Ops KAH	Memo Item PR Deduction (\$40.00 Bi-Weekly)
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	
Full Name of Individual (Last, First, Middle Ini Beasley, Selece Yvonne, , , Mailing Address 974 Hearthstone Place	Date of Receipt	
City Stone Mountain	State Zip Code GA 30083	Transaction ID : SA11AI.7824 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) SVP Chief Compl Officer	Memo Item PR Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1480,00	
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 22 S Stone Bridge Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fayetteville	State Zip Code AR 72701	Transaction ID : SA11AI.7826 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) Branch Director	Memo Item PR Deduction (\$10.00 Weekly)
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	
SUBTOTAL of Receipts This Page (optional)	•	230.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and so or for commercial purposes, other than using the	Statements may not be sold or used by any per- e name and address of any political committee t						
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC GENTIVAPAC						
Full Name of Individual (Last, First, Middle In Causby, David, A, , Mailing Address 4000 Heatherwood Way	itial) or Full Organization Name	Date of Receipt					
City	State Zip Code	11 20 2020 Transaction ID : SA11AI.7827					
Roswell	GA 30075	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	300.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Gentiva DBA Kindred at Home	Chief Executive Officer	PR Deduction (\$100.00 Bi-Weekly)					
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼							
Full Name of Individual (Last, First, Middle In Cavanaugh, Peter, , ,	Date of Receipt						
Mailing Address 1015 Eve Orchid Drive		11 20 2020					
City	State Zip Code	Transaction ID : SA11AI.7828					
Greenwood	MO 64034	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	30.00					
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) RVP Financial Operations	Memo Item PR Deduction (\$10.00 Bi-Weekly)					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00						
Full Name of Individual (Last, First, Middle In Cundiff, Barbara, , ,	itial) or Full Organization Name	Date of Receipt					
Mailing Address 4301 San Marcos Rd.		11 13 2020					
City	State Zip Code	Transaction ID : SA11AI.7830					
Louisville	KY 40299	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	75.00					
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) AVP Operations HH	Memo Item PR Deduction (\$25.00 Bi-Weekly)					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify)	575.00						
SUBTOTAL of Receipts This Page (optional)	>	405.00					
TOTAL This Period (last page this line number	only)						

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Midd Dolin, Connie, , , Mailing Address 105 Ashton Woods Ct	dle Initial) or Full Organization Name	Date of Receipt 11 20 2020
City	State Zip Code	Transaction ID : SA11AI.7831
Mt Holly	NC 28120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	90.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Gentiva DBA Kindred at Home	VP, CAO, KAH	PR Deduction (\$30.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	
Full Name of Individual (Last, First, Midd Downing, Christopher, , , Mailing Address 2405 Cardinal Way	dle Initial) or Full Organization Name	Date of Receipt
2405 Calullal Way		11 20 2020
City	State Zip Code	Transaction ID : SA11AI.7832
Tucker	GA 30084	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) VP Government Affairs	Memo Item PR Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Midd Elkin, Mary, , ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 125 Red Robin Lane		11 20 2020
City	State Zip Code	Transaction ID : SA11AI.7833
Vonore	TN 37885	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) VP Enterprise SIs Support	Memo Item PR Deduction (\$40.00 Bi-Weekly)
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	960.00	

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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICES	S INC PAC GENTIVAPAC	
Full Name of Individual (Last, First, Middle In Gieringer, David, S, , Mailing Address 20602 Red Bird Street	itial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 03 2020 Transaction ID : SA11AI.7836
Spring Hill	KS 66083	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) SVP & Chief Accting Off	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name of Individual (Last, First, Middle In Hall, Richard, J, , Mailing Address 108 Leaning Tower Drive	itial) or Full Organization Name	Date of Receipt
City Mooresville	State Zip Code NC 28117	11 03 2020 Transaction ID : SA11AI.7839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) Chief Revenue Officer - SVP	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt
Mailing Address 627 Wheatland Dr.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mcgregor	State Zip Code 76657	Transaction ID : SA11AI.7840 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) VP, Regional Ops, KAH	Memo Item PR Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)		5530.00
TOTAL This Period (last page this line number	only)	

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				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
I \	COMMITTEE (In Full) VA HEALTH SERVICE	S INC PAC	GENTIVAPAC	
	of Individual (Last, First, Middle Jackie, M, ,	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Add	ress 5236 W Alameda Rd			11 20 / 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.7841
Glendale		AZ	85310	Amount of Each Receipt this Period
	nber of contributing ical committee.	С		60.00
Name of En	nployer (for Individual)	Occur	pation (for Individual)	Memo Item
	A Kindred at Home	l .	Financial Operations	PR Deduction (\$20.00 Bi-Weekly)
Receipt For			· · · · · · · · · · · · · · · · · · ·	T N Boddollott (\$20.00 Bt Weekly)
Prima		Aggregate Y	'ear-to-Date ▼	
	(specify) ▼			
Full Name of B. Jans, Lis	of Individual (Last, First, Middle	Initial) or Full Org	ganization Name	Date of Receipt
				<u> </u>
Mailing Add	ress 13783 46th Lane Ne			11 13 2020
City		State	Zip Code	
-	-1	MN	55376	Transaction ID : SA11AI.7843
Saint Micha	el	Amount of Each Receipt this Period		
	nber of contributing ical committee.	45.00		
Gentiva DBA	nployer (for Individual) A Kindred at Home		pation (for Individual) Dir Ops Home Health	Memo Item PR Deduction (\$15.00 Bi-Weekly)
Receipt For	:	Aggregate \	∕ear-to-Date ▼	
Prima Other	ry General (specify) ▼		345.00]
	of Individual (Last, First, Middle	Initial) or Full Org	ganization Name	D. (D.)
C. Johnson				Date of Receipt
Mailing Add	ress 2000 Grande Loch	State	Zip Code	11 20 2020 Transaction ID : SA11AI.7844
Roswell		GA	30075	
				Amount of Each Receipt this Period
	nber of contributing cal committee.	С		300.00
Name of En	nployer (for Individual)	Occui	pation (for Individual)	Memo Item
	A Kindred at Home		Chief Commerical Off	PR Deduction (\$100.00 Bi-Weekly)
Receipt For				
Prima		Aggregate	'ear-to-Date ▼	
	(specify)		500.00	
SUBTOTAL 0	f Receipts This Page (optional).)	405.00
TOTAL This F	Period (last page this line number	er only)		

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	and Statements may not be sold or used by any peg the name and address of any political committee	
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVIC	CES INC PAC GENTIVAPAC	
Full Name of Individual (Last, First, Midd Knight, Rebecca, W, ,	Date of Receipt	
Mailing Address 3048 Steel Creek Rd	11 13 / 2020	
City	State Zip Code	Transaction ID : SA11AI.7845
Georgetown	MS 39078	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Gentiva DBA Kindred at Home	DVP Operations HH	PR Deduction (\$40.00 Bi-Weekly)
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	920.00	
Full Name of Individual (Last, First, Midd Marino, Ron, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 156 Cape Cod Way		11 03 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.7847
Mooresville	NC 28117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2500.00
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) Chief Financial Officer	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2500.00	
Full Name of Individual (Last, First, Midd . Mascardi, Rosa, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 1412 Green Edge Trl		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wake Forest	State Zip Code NC 27587	Transaction ID : SA11AI.7848
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	75.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Gentiva DBA Kindred at Home Receipt For:	DVP Sales KAH	PR Deduction (\$25.00 Bi-Weekly)
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional	al)	2695.00
TOTAL This Period (last page this line num	nber only)	

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(c	he	ck only	or	ıe)							
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NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVIC	ES INC PAC G	ENTIVAPAC		
Full Name of Individual (Last, First, Middle Nordman, Derek, G, , Mailing Address 1906 Skybrooke Lane	e Initial) or Full Organ	ization Name	Date of Receipt	
Tool Chybrodic Land			11 20 2020	
City	State	Zip Code	Transaction ID : SA11AI.7854	
Hoschton	GA	30548	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		60.00	
Name of Employer (for Individual)	Occupati	on (for Individual)	Memo Item	
Gentiva DBA Kindred at Home	SVP CC		PR Deduction (\$20.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 480.00		
Full Name of Individual (Last, First, Middle O'hara, Laurie, , , Mailing Address 702 Woodcrest Dr.	e Initial) or Full Organ	ization Name	Date of Receipt	
			11 20 2020	
City	State Zip Code		Transaction ID : SA11AI.7855	
Winston Salem	NC	27104	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	ÿ			
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupati DVP Sal	ion (for Individual) les KAH	Memo Item PR Deduction (\$20.00 Bi-Weekly)	
Receipt For: Primary General	Aggregate Year	r-to-Date ▼		
Other (specify) ▼	4	480.00		
Full Name of Individual (Last, First, Middle Scrima, Richard, D, ,	e Initial) or Full Organ	ization Name	Date of Receipt	
Mailing Address 368 Whitehall Street			11 20 2020	
City Lynbrook	State NY	Zip Code 11563	Transaction ID : SA11AI.7858 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		30.00	
Name of Employer (for Individual)	Occupati	on (for Individual)	Memo Item	
Gentiva DBA Kindred at Home	Area Dire	ector Sales	PR Deduction (\$10.00 Bi-Weekly)	
Receipt For: Primary General Other (specify)	Aggregate Year	r-to-Date ▼ 240.00]	
SUBTOTAL of Receipts This Page (optional)		150.00	

F	OR	LINE	NU	MBER	:	PAGE	_ ′	13	OF	19
(0	che	ck only	or	ie)						
	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any personal he name and address of any political committee to		
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERVICE	S INC PAC GENTIVAPAC		
Full Name of Individual (Last, First, Middle Shoemaker, Paula, , , Mailing Address 2950 Mt Wilkinson Parkway	Date of Receipt 11 20 2020		
#815 City	State Zip Code		
Atlanta	GA 30339	Transaction ID : SA11AI.7859	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item	
Gentiva DBA Kindred at Home	VP Marketing	PR Deduction (\$40.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00		
Full Name of Individual (Last, First, Middle Snyder, Scott, , , Mailing Address 2805 King Arthur Blvd	Initial) or Full Organization Name	Date of Receipt	
		11 20 2020	
City	State Zip Code	Transaction ID : SA11AI.7860	
Lewisville	TX 75056	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	300.00	
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) SVP, Region Ops KAH	Memo Item PR Deduction (\$100.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		
Full Name of Individual (Last, First, Middle Stengle, Nikolas, , ,	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 1730 Wind Haven Way		11 20 2020	
City	State Zip Code	Transaction ID : SA11AI.7862	
Vienna	VA 22182	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	300.00	
Name of Employer (for Individual) Gentiva DBA Kindred at Home	Occupation (for Individual) EVP Chief Operations	Memo Item PR Deduction (\$100.00 Bi-Weekly)	
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify)	300.00		
SUBTOTAL of Receipts This Page (optional).)	720.00	
TOTAL This Period (last page this line number	er only)		

FO	R LINE	NUMBER	: PAGE	E 14 OF	19
(ch	eck only	one)			
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	13	14	15	16	17

	s and Statements may not be sold or used by any pers sing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) GENTIVA HEALTH SERV	ICES INC PAC GENTIVAPAC	
/ Full Name of Individual (Last, First, Mi		
Wandstrat, Scott, A, ,		Date of Receipt
Mailing Address 121 Ansley Street		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code GA 30030	Transaction ID : SA11AI.7865
Decatur	GA 30030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	153.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Gentiva DBA Kindred at Home	VP Chief Lit Officer	PR Deduction (\$51.00 Bi-Weekly)
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1224.00	
	4	
Full Name of Individual (Last, First, Mi	iddle Initial) or Full Organization Name	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Descript this David
FEC ID number of contribution		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼		
Full Name of Individual (Last, First, Mi	iddle Initial) or Full Organization Name	Date of Receipt
Mailing Address		Date of Receipt
City	State Zip Code	
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	55 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Other (specify)		
SUBTOTAL of Receipts This Page (ontic	onal)	153.00
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TOTAL This Period (last page this line n	number only)	10648.00

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 OF 19				
ITEMIZED DISBURSEMENTS		rate schedule(s)	(check only	THOMBETT:			
		category of the Summary Page	` X 21b	· _ ·			
	Dotalieu		28a	28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
igr angle GENTIVA HEALTH SERVICES IN	C PAC C	SENTIVAPA	VC				
Full Name (Last, First, Middle Initial)							
A. Bank of America				Date of Disbursement			
Mailing Address PO Box 31900			10 15 2020				
City Tampa	State FL	Zip Code 33631-3900		FEC Identification Number			
Purpose of Disbursement		00001 0000		C			
Bank service fee			L	Transaction ID : SB21B.7867			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		1,700	44.93			
Senate	Primary	General					
State: District:	Other (spec	eify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
B. Bank of America				Date of Disbursement			
Mailing Address PO Box 31900				11 16 2020			
City Tampa	State FL	Zip Code 33631-3900		FEC Identification Number			
Purpose of Disbursement		33031-3900		C			
Bank service fee				Transaction ID : SB21B.7868			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		Туре	44.00			
Senate	Primary	General		7 7			
President State: District:	Other (spec	ify)		Memo Item			
Full Name (Last, First, Middle Initial)							
C.				Date of Disbursement			
Mailing Address				M M / D D / Y Y Y Y			
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement		C					
Candidate Name							
			Category/ Type	Amount of Each Disbursement this Period			
	ment For:			7 7 7			
Senate President	Primary Other (spec	General ifv) ▼		П			
State: District:	o. (opoo	<i>31</i> ▼		Memo Item			
				99.00			
SUBTOTAL of Disbursements This Page (optional)			·····•	88.93			
TOTAL This Period (last page this line number only)			88.93			

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SCHEDULE B (FEC Form 3X)	11	FOR LINE NUMBER: PAGE 16 OF 19			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b		
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 IN			Solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. KIND FOR CONGRESS COMMIT	TEE		Date of Disbursement		
Mailing Address PO BOX 184			10 15 2020		
City LA CROSSE	State Zip Code 54602		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name		011	C C00312017 Transaction ID : SB23.7870		
KIND, RONALD JAMES, , ,		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Senate President Disburse	ment For: 2020 Primary General Other (specify) ▼		1500.00		
State: WI District: 03	(-II 3/) V		Memo Item		
B. PALLONE FOR CONGRESS Mailing Address PO BOX 3176			Date of Disbursement 10 15 2020		
City LONG BRANCH Purpose of Disbursement Contribution	011	FEC Identification Number C C00226928			
Candidate Name PALLONE, FRANK JR, , , Office Sought: x	ment For: 2020 Primary 🗶 General Other (specify)	Category/ Type	Transaction ID: SB23.7874 Amount of Each Disbursement this Period 2000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. RICHARD E NEAL FOR CONGRE	ESS COMMITTEE		Date of Disbursement		
Mailing Address 76 MAGNOLIA TERRACE			10 15 2020		
City SPRINGFIELD Purpose of Disbursement Contribution Candidate Name	State Zip Code MA 01108	011	FEC Identification Number C C00226522 Transaction ID : SB23.7893		
NEAL, RICHARD E MR., , ,		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: W House Disburse	ment For: 2020 Primary 🗶 General Other (specify) 🔻		2000.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only			5500.00		

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Use separate schedule(s) for each category of the Detailed Summary Page 21b 22 22 28 28 30b 28 28 28 30b 28 28 28 28 30b 28 28 28 28 30b 28 28 30b 28 28 28 30b 28 30b	SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 17 OF 19			
Consider Name Consider Nam	-			TOTT EINE NOMBETT				
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WASHINGTON DC 20013 Purpose of Disbursement Contribution Candidate Name SHAHEEN, JEANNE, , Office Sought:								
Purpose of Disbursement Contribution Candidate Name SHAHEEN, JEANNE, , Office Sought: House President Other (specify) ▼ State: NH District: 00 Full Name (Last, First, Middle Initial) B. Category' Type Other (specify) ▼ State Zip Code Primary Category' Type Category' Type Disbursement For: 2020 Category' Type Date of Disbursement Candidate Name City State Zip Code Primary General Other (specify) Full Name (Last, First, Middle Initial) Candidate Name City Senate Primary General Other (specify) Fill Name (Last, First, Middle Initial) Candidate Name City State Zip Code Primary General Other (specify) Fill Name (Last, First, Middle Initial) Candidate Name City Senate Primary General Other (specify) Fill Name (Last, First, Middle Initial) Candidate Name City State Zip Code Primary General Other (specify) Fill Name (Last, First, Middle Initial) Category' Type Office Sought: Senate Primary General Other (specify) Fill Name (Last, First, Middle Initial) Category' Type Office Sought: Senate Primary General Other (specify) Whem of Each Disbursement this Period Fill Name (Last, First, Middle Initial) Category' Type Office Sought: Senate Primary General Other (specify) Whem of Each Disbursement this Period Fill Name (Last, First, Middle Initial) Category' Type Office Sought: Senate Primary General Other (specify) Whem of Each Disbursement this Period Fill Name (Last, First, Middle Initial) Category' Type Office Sought: Senate Primary General Other (specify) Whem of Each Disbursement this Period	•		1 '		FEC Identification Number			
Contribution Candidate Name SHAHEEN, JEANNE, , , Office Sought: House Primary		טכ	20013		C C00457325			
SHAPER, JEANNE, , Office Sought:	•			011				
SHAHEEN, JEANNE, , , Office Sought: House		Category/						
X Senate President Other (specify) Memo Item					2000.00			
State: NH District: 00 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) Candidate Name Category/ Full Name (Last, First, Middle Initial) Category/ State: District: Full Name (Last, First, Middle Initial) Category/ Purpose of Disbursement Candidate Name City State Zip Code FEC Identification Number Category/ Date of Disbursement this Period Amount of Each Disbursement Category/ Type Office Sought: House Primary General Other (specify) ▼ Memo Item Substortal of Disbursements This Page (optional)					2000.00			
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City	Mailing Address	M M / D D / Y Y Y Y						
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7500 00	State: District:				iviemo item			
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TOTAL This Period (last page this line number only)	SUBTOTAL of Disbursements This Page (optional)			·····•	2000.00			
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SCHEDULE B (FEC Form 3X)		Use ser	Use separate schedule(s)		FOR LINE NUMBER: PAGE 18 OF 19			
ITEMIZED D	for each	category of the Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c x 29 30b				
					on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF CO	MMITTEE (In Full) HEALTH SERVICES IN				Series Sommercial north such committee.			
Full Name (La	st, First, Middle Initial)							
A. Campaigr	n to Elect Walter ("Four")		Date of Disbursement					
Mailing Addres	ss 2606 S Lipscomb Street				10 15 2020			
City Amarillo		State TX	Zip Code 79109		FEC Identification Number			
Purpose of Disbursement Walter Price, STATE HOUSE 87th TX Candidate Name					Transaction ID : SB29.7884			
Candidate Nai	nie			Category/ Type	Amount of Each Disbursement this Period			
Office Sought:	House Disburse Senate President	Primary	✗ General	1000.00				
State:	District:	Other (spe	echy) 🔻		Memo Item			
B. Charles P	st, First, Middle Initial) Perry Campaign ss PO Box 94806				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Lubbock		State TX	Zip Code 79493		FEC Identification Number			
Purpose of Dis Charles Perry Candidate Nan	, STATE SENATE 28th TX			011 Category/	Transaction ID : SB29.7880 Amount of Each Disbursement this Period			
Office Sought:	Senate Primary 🗶 General				1000.00			
State:	President District:	Other (spe	ecity)		Memo Item			
•	st, First, Middle Initial) House Republican Trust,	Inc.			Date of Disbursement			
Mailing Addres	ss c/o Bruce Williamson PO Box 430				10 15 2020			
City Monroe		State GA	Zip Code 30655		FEC Identification Number			
Purpose of Dis Contribution	sbursement	<u> </u>	30033	011	C			
Candidate Nar	me			Category/ Type	Transaction ID: SB29.7876 Amount of Each Disbursement this Period			
Office Sought:	House Disburse Senate President	ement For: Primary Other (spe	General		5000.00			
State:	District:	``	, ·		Memo Item			
SUBTOTAL of D	President	Other (spe	ecify) ▼	······	Memo Item 7000.00			

S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 19 OF 19				
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		one)			
		Summary Page	21b 28a	22 28b	23 26 27 28c x 29 30b		
Anninformation coming from such Demants and Chate		mat ha salal au wa					
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 IN	IC PAC	GENTIVAPA	\C				
<u>/</u>							
Full Name (Last, First, Middle Initial)				Doto of Di	sbursement		
A. Giovanni Capriglione Campaign				Date of Dis			
Mailing Address 1352 Ten Bar Trail				10	15 2020		
City	State	Zip Code		FEC Identi	fication Number		
Southlake Purpose of Disbursement	TX	76092					
Giovanni Capriglione, STATE HOUSE 98th TX			011	C			
Candidate Name			Category/	Transaction ID : SB29.7882 Amount of Each Disbursement this Period			
			Type	Amount of	Each Dispursement this 1 chod		
Office Sought: House Disburse	ment For:	2020		1000.00			
	Senate Primary General						
State: District:	Other (spe	ecity) 🔻		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. Lois W. Kolkhorst Campaign				Date of Dis	sbursement		
2010 W. Rolland Gampaign				M = M /	D D / Y Y Y Y		
Mailing Address PO Box 2546				10	15 2020		
	<u> </u>	T=: 0 :					
City Brenham	State TX	Zip Code 77834		FEC Identi	fication Number		
Purpose of Disbursement		77004		C			
Lois Kolhorst, STATE SENATE 18th TX			011		action ID : SB29.7878		
Candidate Name			Category/		Each Disbursement this Period		
Office Country House			Туре		1000.00		
Office Sought: House Disburse Senate	ment For: Primary				1000.00		
President Primary (Seneral Other (specify)				п			
State: District:	(-1	- 37		Memo	Item		
Full Name (Last, First, Middle Initial)							
C. Sarah Davis Campaign				Date of Dis	sbursement		
				M M /	D D / Y Y Y Y Y		
Mailing Address 1208 Bartlett				10	15 2020		
City	State	Zip Code		FFO Islandi	Single and Alexandra		
Houston	TX	77006		rec identi	fication Number		
Purpose of Disbursement Sarah Davis, STATE HOUSE 134th TX			644				
Candidate Name			011		action ID : SB29.7886		
Candidate Name			Category/ Type	Amount of	Each Disbursement this Period		
Office Sought: House Disburse	ment For:	2020	туре		1000.00		
Senate	Primary	∡ General					
President	Other (spe	ecify) 🔻		Memo	Item		
State: District:							
					2000 00		
SUBTOTAL of Disbursements This Page (optional).			·····•		3000.00		
TOTAL This Period (last page this line number only	<i>'</i>)				10000.00		