

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

ADDRESS (number and street) 3350 RIVERWOOD PARKWAY, SUITE 1400 ATLANTA GA 30339

2. FEC IDENTIFICATION NUMBER C00407080 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 24 / 2020 through 12 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Downing, Christopher, , , Type or Print Name of Treasurer

Signature of Treasurer Downing, Christopher, , , [Electronically Filed] Date 01 / 25 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="65168.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="49082.63"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3172.15"/>	<input type="text" value="42985.60"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="52254.78"/>	<input type="text" value="108153.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5044.51"/>	<input type="text" value="60943.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="47210.27"/>	<input type="text" value="47210.27"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3036.00	38890.00
(ii) Unitemized	136.15	4095.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3172.15	42985.60
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3172.15	42985.60
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3172.15	42985.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3172.15	42985.60

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	44.51	343.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44.51	343.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	49600.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	11000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5044.51	60943.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5044.51	60943.62

DETAILED SUMMARY PAGE
of Disbursements

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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)	3172.15	42985.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3172.15	42985.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	44.51	343.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44.51	343.62

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

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

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

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

A. Aurelio, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 Wickford Court
 City Keller State TX Zip Code 76248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP, Region Ops KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7899
 Amount of Each Receipt this Period 120.00
 Memo Item
 PR Deduction (\$40.00 Bi-Weekly)

B. Beasley, Selece Yvonne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 974 Hearthstone Place
 City Stone Mountain State GA Zip Code 30083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP Chief Compl Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7900
 Amount of Each Receipt this Period 60.00
 Memo Item
 PR Deduction (\$20.00 Bi-Weekly)

C. Carr, Ginger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 S Stone Bridge Rd
 City Fayetteville State AR Zip Code 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Branch Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7902
 Amount of Each Receipt this Period 60.00
 Memo Item
 PR Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Causby, David, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 Heatherwood Way
 City Roswell State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7903
 Amount of Each Receipt this Period 300.00
 Memo Item
 PR Deduction (\$100.00 Bi-Weekly)

B. Cavanaugh, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 Eve Orchid Drive
 City Greenwood State MO Zip Code 64034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) RVP Financial Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7904
 Amount of Each Receipt this Period 30.00
 Memo Item
 PR Deduction (\$10.00 Bi-Weekly)

C. Cundiff, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 San Marcos Rd.
 City Louisville State KY Zip Code 40299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) AVP Operations HH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7906
 Amount of Each Receipt this Period 75.00
 Memo Item
 PR Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	405.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. Dolin, Connie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 Ashton Woods Ct
 City Mt Holly State NC Zip Code 28120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP, CAO, KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7907
 Amount of Each Receipt this Period 90.00
 Memo Item
 PR Deduction (\$30.00 Bi-Weekly)

B. Downing, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 Cardinal Way
 City Tucker State GA Zip Code 30084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7908
 Amount of Each Receipt this Period 150.00
 Memo Item
 PR Deduction (\$50.00 Bi-Weekly)

C. Elkin, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 Red Robin Lane
 City Vonore State TN Zip Code 37885
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Enterprise SIs Support
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7909
 Amount of Each Receipt this Period 120.00
 Memo Item
 PR Deduction (\$40.00 Bi-Weekly)

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

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

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

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

A. Howard, Jesse, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 Wheatland Dr.
 City Mcgregor State TX Zip Code 76657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP, Regional Ops, KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7912
 Amount of Each Receipt this Period 30.00
 Memo Item
 PR Deduction (\$10.00 Bi-Weekly)

B. Hughes, Jackie, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5236 W Alameda Rd
 City Glendale State AZ Zip Code 85310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) RVP Financial Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7913
 Amount of Each Receipt this Period 60.00
 Memo Item
 PR Deduction (\$20.00 Bi-Weekly)

C. Jackson, Jennifer, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 W 34th St
 City Saint Louis Park State MN Zip Code 55426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Branch Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7914
 Amount of Each Receipt this Period 30.00
 Memo Item
 PR Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Jans, Lisa, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13783 46th Lane Ne
 City Saint Michael State MN Zip Code 55376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Area Dir Ops Home Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7915
 Amount of Each Receipt this Period 45.00
 Memo Item
 PR Deduction (\$15.00 Bi-Weekly)

B. Johnson, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 Grande Loch
 City Roswell State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) EVP Chief Commerical Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7916
 Amount of Each Receipt this Period 300.00
 Memo Item
 PR Deduction (\$100.00 Bi-Weekly)

C. Knight, Rebecca, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3048 Steel Creek Rd
 City Georgetown State MS Zip Code 39078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Operations HH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 24 / 2020
Transaction ID : SA11AI.7917
 Amount of Each Receipt this Period 120.00
 Memo Item
 PR Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	465.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. Mascardi, Rosa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1412 Green Edge Trl
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Sales KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7920
 Amount of Each Receipt this Period 75.00
 Memo Item
 PR Deduction (\$25.00 Bi-Weekly)

B. Mathews, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3205 Cumberland Blvd Unit 308
 City Atlanta State GA Zip Code 30339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Corporate HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7921
 Amount of Each Receipt this Period 150.00
 Memo Item
 PR Deduction (\$50.00 Bi-Weekly)

C. Nordman, Derek, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1906 Skybrooke Lane
 City Hoschton State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP CCO KAH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7926
 Amount of Each Receipt this Period 60.00
 Memo Item
 PR Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. O'hara, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 Woodcrest Dr.
 City Winston Salem State NC Zip Code 27104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP Sales KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7927
 Amount of Each Receipt this Period 60.00
 Memo Item
 PR Deduction (\$20.00 Bi-Weekly)

B. Scrima, Richard, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 Whitehall Street
 City Lynbrook State NY Zip Code 11563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) Area Director Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7930
 Amount of Each Receipt this Period 30.00
 Memo Item
 PR Deduction (\$10.00 Bi-Weekly)

C. Shoemaker, Paula, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 Mt Wilkinson Parkway #815
 City Atlanta State GA Zip Code 30339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7931
 Amount of Each Receipt this Period 120.00
 Memo Item
 PR Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. Snyder, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 King Arthur Blvd
 City Lewisville State TX Zip Code 75056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) SVP, Region Ops KAH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7932
 Amount of Each Receipt this Period 300.00
 Memo Item
 PR Deduction (\$100.00 Bi-Weekly)

B. Stengle, Nikolas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1730 Wind Haven Way
 City Vienna State VA Zip Code 22182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) EVP Chief Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7933
 Amount of Each Receipt this Period 300.00
 Memo Item
 PR Deduction (\$100.00 Bi-Weekly)

C. Trail, Mikel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4850 Payson Terr SE
 City Atlanta State GA Zip Code 30339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) DVP HR Employee Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7934
 Amount of Each Receipt this Period 120.00
 Memo Item
 PR Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

A. Waller, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 998 Danbury Court
 City Eagan State MN Zip Code 55123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) RVP Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7935
 Amount of Each Receipt this Period 78.00
 Memo Item
 PR Deduction (\$26.00 Bi-Weekly)

B. Wandstrat, Scott, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Ansley Street
 City Decatur State GA Zip Code 30030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gentiva DBA Kindred at Home Occupation (for Individual) VP Chief Lit Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1377.00

Date of Receipt 12 / 31 / 2020
Transaction ID : SA11AI.7936
 Amount of Each Receipt this Period 153.00
 Memo Item
 PR Deduction (\$51.00 Bi-Weekly)

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	231.00
TOTAL This Period (last page this line number only).....▶	3036.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 31900

City
Tampa

State
FL

Zip Code
33631-3900

Purpose of Disbursement
Bank service fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.7895
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. MIKE CRAPO FOR US SENATE

Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Date of Disbursement: 12 / 02 / 2020

Mailing Address: PO BOX 1948

City: BOISE State ID: Zip Code: 83701

Purpose of Disbursement: Contribution
Candidate Name: Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

FEC Identification Number: C00330886
Transaction ID: SB23.7898
Amount of Each Disbursement this Period: 5000.00

State: ID District: 00 Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

FEC Identification Number
Amount of Each Disbursement this Period
 Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

FEC Identification Number
Amount of Each Disbursement this Period
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00