

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="51130.94"/>	<input type="text" value="51130.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59487.41"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7325.60"/>	<input type="text" value="18530.00"/>
(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="66813.01"/>	<input type="text" value="69660.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1066.44"/>	<input type="text" value="3914.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65746.57"/>	<input type="text" value="65746.57"/>
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).....	3814.60	8306.50
(ii) Unitemized	3511.00	10223.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7325.60	18530.00
(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)	7325.60	18530.00
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))..... ▶	7325.60	18530.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7325.60	18530.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	66.44	114.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	66.44	114.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	3800.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	1066.44	3914.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1066.44	3914.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7325.60	18530.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7325.60	18530.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	66.44	114.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	66.44	114.37

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. Mara Benner

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Inc. Occupation Vice President Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.10782

Amount of Each Receipt this Period
380.00

Bi-weekly payroll deduction - \$190

Full Name (Last, First, Middle Initial)
B. Robert Brunson

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Inc. Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.10788

Amount of Each Receipt this Period
100.00

Bi-weekly payroll deduction - \$50

Full Name (Last, First, Middle Initial)
C. David Causby

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.10791

Amount of Each Receipt this Period
200.00

Bi-weekly payroll deduction - \$100

SUBTOTAL of Receipts This Page (optional).....▶ 680.00

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: PAGE 7 OF 14
(check only one)

<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. Ronald Crossno
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Parkway
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Dir- National Medical

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.10799

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction - \$70

B. Shannon Drake
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation VP - Assoc Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.10807

Amount of Each Receipt this Period 140.00

Biweekly payroll deduction - \$70

C. David Eubanks
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Parkway
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Occupation AVP - Clinical Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.10812

Amount of Each Receipt this Period 100.00

Biweekly payroll deduction - \$50

SUBTOTAL of Receipts This Page (optional)..... ▶ 380.00

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 14
<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

Full Name (Last, First, Middle Initial) A. Dave Gieringer		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10819
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 150.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction - \$75
Name of Employer Gentiva Health Services Inc. Occupation Vice President Acctg / Controller	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00

Full Name (Last, First, Middle Initial) B. Mary Ann Gregory		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10820
Mailing Address 3350 Riverwood Parkway Suite 1400		Amount of Each Receipt this Period 100.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction - \$50
Name of Employer Gentiva Health Services Occupation RVP Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) C. Dean Johnson		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10832
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00
City Atlanta State GA Zip Code 30339	FEC ID number of contributing federal political committee. C	Biweekly payroll deduction - \$100
Name of Employer Gentiva Occupation Division VP - Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 14
	<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

Full Name (Last, First, Middle Initial) A. Christopher Macinnis		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10839
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 120.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation RVP - Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		Bi-weekly payroll deduction - \$60

Full Name (Last, First, Middle Initial) B. Russ McDonough		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10842
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation Chief Information Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Bi-weekly payroll deduction - \$100

Full Name (Last, First, Middle Initial) C. Jerrold Perchik		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10855
Mailing Address 3350 Riverwood Pkwy Suite 1400		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation VP - Assoc Gen Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Bi-weekly payroll deduction - \$50

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 14
<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

Full Name (Last, First, Middle Initial) A. Perry Pruett		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10857
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 140.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation Div VP - Information Technology
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
		Bi-weekly payroll deduction - \$70

Full Name (Last, First, Middle Initial) B. Todd Sexe		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10865
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services Inc.	Occupation VP Home Health Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Bi-weekly payroll deduction - \$100

Full Name (Last, First, Middle Initial) C. Jeff Shaner		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10866
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation Division VP of Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Bi-weekly payroll deduction - \$100

SUBTOTAL of Receipts This Page (optional).....▶	540.00
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 14
	<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

Full Name (Last, First, Middle Initial) A. Susan P Smith		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10870
Mailing Address 3350 Riverwood Parkway Suite 1400		Amount of Each Receipt this Period 170.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services	Occupation VP Clinical Practice & Research
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
		Bi-weekly payroll deduction - \$85

Full Name (Last, First, Middle Initial) B. Paul Stein		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10871
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation VP - IS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Bi-weekly payroll deduction - \$50

Full Name (Last, First, Middle Initial) C. Harmon Strange		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10872
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 384.60
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services Inc.	Occupation President & CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50	
		Bi-weekly payroll deduction - \$192.30

SUBTOTAL of Receipts This Page (optional).....▶	654.60
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 14
<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

Full Name (Last, First, Middle Initial) A. Deborah Suit		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10873
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 200.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva	Occupation VP - Training and Development
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Bi-weekly payroll deduction - \$100

Full Name (Last, First, Middle Initial) B. Gena Wagner		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10880
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services, Inc.	Occupation AVP - Operations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Bi-weekly payroll deduction - \$50

Full Name (Last, First, Middle Initial) C. Charlotte Weaver		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.10882
Mailing Address 3350 Riverwood Pkwy Ste 1400		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Gentiva Health Services, Inc.	Occupation Chief Clinical Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Bi-weekly payroll deduction - \$50

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 14
	<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. Damien Weston
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11AI.10884

Amount of Each Receipt this Period
150.00

Bi-weekly payroll deduction - \$75

B. James Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Parkway
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Risk Mgt.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11AI.10887

Amount of Each Receipt this Period
140.00

Bi-weekly payroll deduction - \$70

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	3814.60

**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"/> 24	<input type="checkbox"/> 25	<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. BRADY FOR CONGRESS

Mailing Address PO BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TX District: 08

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : SB23.10770

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

1000.00

1000.00
