

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.
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Slusser

Signature of Treasurer *Eric Slusser* [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**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="2013"/> | | <input type="text" value="47597.02"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="47597.02"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="74596.70"/> | <input type="text" value="74596.70"/> |
| (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="122193.72"/> | <input type="text" value="122193.72"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="55691.32"/> | <input type="text" value="55691.32"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="66502.40"/> | <input type="text" value="66502.40"/> |
| 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

FEC Form 3X (Rev. 06/2004)

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)..... | 65084.20 | 65084.20 |
| (ii) Unitemized | 4512.50 | 4512.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶ | 69596.70 | 69596.70 |
| (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) | 69596.70 | 69596.70 |
| 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..... | 5000.00 | 5000.00 |
| 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))..... ▶ | 74596.70 | 74596.70 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 74596.70 | 74596.70 |

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 | 238.82 | 238.82 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 238.82 | 238.82 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 55450.00 | 55450.00 |
| 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 | 2.50 | 2.50 |
| (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))..... | 2.50 | 2.50 |
| 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)) .. | 55691.32 | 55691.32 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 55691.32 | 55691.32 |

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) | 69596.70 | 69596.70 |
| 34. Total Contribution Refunds (from Line 28(d)) | 2.50 | 2.50 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 69594.20 | 69594.20 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 238.82 | 238.82 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 238.82 | 238.82 |

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 48
(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. Patricia Aarthun

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 Dir - Payroll

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10066

Amount of Each Receipt this Period
350.00

Bi-weekly Payroll Deduction - \$25

Full Name (Last, First, Middle Initial)
B. Scott Allen

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 Area Director Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10179

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

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

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 Executive Director - Hospice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10180

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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 48 |
| | <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. John Aurelio | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10073 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services Inc. | Occupation Regional VP Nursing Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 560.00 | |
| Bi-weekly Payroll Deduction - \$40 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Camille Bagwell | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10234 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 350.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation AVP - Operations |
| 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 - \$25 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Kelly Baker | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10236 |
| Mailing Address 3350 Riverwood Pkwy Suite 1400 | | Amount of Each Receipt this Period 210.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva Health Services | Occupation Dir-Contracts Administration |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |
| Bi-weekly payroll deduction - \$15 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1120.00 |
| 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 48 |
| <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. Selece Beasley | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10298 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 280.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly payroll deduction - \$20 |
| Name of Employer Gentiva | Occupation Director Compliance | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mara Benner | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10299 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 2660.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly payroll deduction - \$190 |
| Name of Employer Gentiva Health Services Inc. | Occupation Vice President Government Affairs | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2660.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Cathy Blanchard | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10300 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly payroll deduction - \$40 |
| 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 ▼ 560.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3500.00 |
| 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 9 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Travis Blaser

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 - Ops - Hospice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10301

Amount of Each Receipt this Period
 390.00

Bi-weekly payroll deduction - \$30

Full Name (Last, First, Middle Initial)
B. Shane Brinkerhoff

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 - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10303

Amount of Each Receipt this Period
 350.00

Bi-weekly payroll deduction - \$25

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

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 Director - Regional Rehab

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 490.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10305

Amount of Each Receipt this Period
 490.00

Bi-weekly payroll deduction - \$35

SUBTOTAL of Receipts This Page (optional)..... ▶ 1230.00

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 10 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. 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 ▼
 700.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10306

Amount of Each Receipt this Period
 700.00

Bi-weekly payroll deduction - \$50

Full Name (Last, First, Middle Initial)
B. Alida Calaway

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 - Ops - Hospice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10307

Amount of Each Receipt this Period
 240.00

Bi-weekly payroll deduction - \$30

Full Name (Last, First, Middle Initial)
c. John Camperlengo

Mailing Address 3350 Riverwood Pkwy
 Ste 1400

City Atlanta State GA Zip Code 33039

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

Name of Employer Gentiva Health Services, Inc. Occupation SVP, CCO & Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10308

Amount of Each Receipt this Period
 350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional)..... ▶ 1290.00

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 48 |
| | <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. David Causby | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10311 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 2660.00 |
| 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2660.00 | |
| | | Bi-weekly payroll deduction - \$190 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Tanya Champion | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10313 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 420.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Area Director Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| | | Bi-weekly payroll deduction - \$30 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Raymond Clark | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10314 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 480.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Reg. Director Clinical - Hospice |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 480.00 | |
| | | Bi-weekly payroll deduction - \$40 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3560.00 |
| 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 48 |
| | <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. Stephen Collins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy
 Ste 1400
 City Atlanta State GA Zip Code 30339
 Name of Employer Gentiva Occupation AVP - Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 30 / 2013
Transaction ID : SA11AI.10316
 Amount of Each Receipt this Period 420.00
 Bi-weekly payroll deduction - \$30

B. James Costain
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy
 Ste 1400
 City Atlanta State GA Zip Code 30339
 Name of Employer Gentiva Occupation AVP - Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2013
Transaction ID : SA11AI.10318
 Amount of Each Receipt this Period 350.00
 Bi-weekly payroll deduction - \$25

C. Michael Craig
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Pkwy
 Ste 1400
 City Atlanta State GA Zip Code 30339
 Name of Employer Gentiva Occupation AVP - Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 06 / 30 / 2013
Transaction ID : SA11AI.10319
 Amount of Each Receipt this Period 490.00
 Bi-weekly payroll deduction - \$35

SUBTOTAL of Receipts This Page (optional).....▶ 1260.00
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 48 |
| | <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. 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 ▼
980.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10320

Amount of Each Receipt this Period
980.00

Bi-weekly payroll deduction - \$70

B. Barbara Cundiff
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 Health Services Inc. Occupation Area Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10321

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

c. David Cygan
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 - Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10323

Amount of Each Receipt this Period
532.00

Bi-weekly payroll deduction - \$38

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1862.00 |
| 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 48 |
| <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. Bernadine Dailey
 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, Inc. Occupation AVP - Operations
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **06 / 30 / 2013**
Transaction ID : SA11AI.10324
 Amount of Each Receipt this Period **420.00**
 Bi-weekly payroll deduction - \$30

B. Christian Dejesus
 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 - Sales Development - HH
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **280.00**

Date of Receipt **06 / 30 / 2013**
Transaction ID : SA11AI.10326
 Amount of Each Receipt this Period **280.00**
 Bi-weekly payroll deduction - \$40

C. Connie Dolin
 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 Area Dir - Operations (HH)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **06 / 30 / 2013**
Transaction ID : SA11AI.10327
 Amount of Each Receipt this Period **420.00**
 Bi-weekly payroll deduction - \$30

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1120.00 |
| 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 15 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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 ▼
 980.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10328

Amount of Each Receipt this Period
 980.00

Bi-weekly payroll deduction - \$70

Full Name (Last, First, Middle Initial)
B. Indy Edwards

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 - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 490.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10332

Amount of Each Receipt this Period
 490.00

Bi-weekly payroll deduction - \$35

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

Mailing Address 3350 Riverwood Pkwy

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 560.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10333

Amount of Each Receipt this Period
 560.00

Bi-weekly payroll deduction - \$40

SUBTOTAL of Receipts This Page (optional)..... ▶ 2030.00

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 16 OF 48 |
| <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. Michael Elrod
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, Inc. Occupation RVP - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
980.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10334

Amount of Each Receipt this Period
980.00

Bi-weekly payroll deduction - \$70

B. 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 ▼
700.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10336

Amount of Each Receipt this Period
700.00

Bi-weekly payroll deduction - \$50

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

Mailing Address 3350 Riverwood Pkwy
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation RVP - Sales (HH)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10339

Amount of Each Receipt this Period
560.00

Bi-weekly payroll deduction - \$40

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2240.00 |
| 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 17 OF 48 |
| | <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. John Friedman
Full Name (Last, First, Middle Initial)

Mailing Address 3350 Riverwood Pkwy
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation AVP - Sales (HH)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10342

Amount of Each Receipt this Period
390.00

Bi-weekly payroll deduction - \$30

B. Cheryl Funk
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 Area Director - Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10343

Amount of Each Receipt this Period
210.00

Bi-weekly payroll deduction - \$15

C. David Garrity
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 Area Director - Sales (HH)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10344

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

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 18 OF 48 |
| <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 06 / 30 / 2013 Transaction ID : SA11AI.10345 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 1050.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly 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 ▼ 1050.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mary Ann Gregory | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10347 |
| Mailing Address 3350 Riverwood Parkway Suite 1400 | | Amount of Each Receipt this Period 700.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly 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 ▼ 700.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Michael Grieco | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10348 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | | Bi-weekly payroll deduction - \$40 |
| Name of Employer Gentiva Health Services Inc. | Occupation AVP - Finance | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 560.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2310.00 |
| 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 19 OF 48 |
| | <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. Nancy Guerland | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10350 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation AVP - Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 560.00 | |
| | | Bi-weekly payroll deduction - \$40 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. John Hamilton | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10354 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 700.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation VP - Compliance |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |
| | | Bi-weekly payroll deduction - \$50 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Teresa Harrell | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10355 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 420.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Regional Director - HR |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| | | Bi-weekly payroll deduction - \$30 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1680.00 |
| 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 20 OF 48 |
| | <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. Jennifer Harwood
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 Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10356

Amount of Each Receipt this Period
360.00

Bi-weekly payroll deduction - \$30

B. Jane Heideman
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 Health Services Inc. Occupation AVP - Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10358

Amount of Each Receipt this Period
490.00

Bi-weekly payroll deduction - \$10

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

Mailing Address 3350 Riverwood Pkwy
Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Area Director - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10144

Amount of Each Receipt this Period
420.00

Bi-weekly payroll deduction - \$30

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1270.00 |
| 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 21 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Monica Hullinger

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 VP - Home Health Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt **06 / 30 / 2013**

Transaction ID : SA11Al.10145

Amount of Each Receipt this Period **560.00**

Bi-weekly payroll deduction - \$40

Full Name (Last, First, Middle Initial)
B. Mark Hunt

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 RVP - Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt **06 / 30 / 2013**

Transaction ID : SA11Al.10146

Amount of Each Receipt this Period **560.00**

Bi-weekly payroll deduction - \$40

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

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 Division VP - Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt **06 / 30 / 2013**

Transaction ID : SA11Al.10149

Amount of Each Receipt this Period **1400.00**

Bi-weekly payroll deduction - \$100

SUBTOTAL of Receipts This Page (optional)..... ▶ **2520.00**

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 22 OF 48
(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. John Karr
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 - Compensation & Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10151

Amount of Each Receipt this Period
1050.00

Bi-weekly payroll deduction - \$75

B. Debbie Ann Kearns
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 ▼
420.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10152

Amount of Each Receipt this Period
420.00

Bi-weekly payroll deduction - \$30

C. Jennifer Kisluk
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 Finance Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10154

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional)..... ▶ 1820.00

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 23 OF 48 |
| <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. Rebecca Knight | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10155 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation AVP - Operations |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 560.00 | |
| | | Bi-weekly payroll deduction - \$40 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Robert Koch | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10156 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 350.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation AVP - Operations |
| 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 - \$25 |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Christopher Macinnis | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10158 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 840.00 |
| 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 ▼ 840.00 | |
| | | Bi-weekly payroll deduction - \$60 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1750.00 |
| 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 24 OF 48 |
| | <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. Kevin Marrazzo | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10232 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 750.00 |
| City Atlanta | State GA | |
| Zip Code 30339 | | Aggregate Year-to-Date ▼ 750.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Gentiva Health Services Inc. | Occupation Assistant Vice President Legal | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Rosa Mascardi | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10159 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 340.00 |
| City Atlanta | State GA | |
| Zip Code 30339 | | Bi-weekly payroll deduction - \$25 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Gentiva | Occupation AVP - Sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Michelle Mazzone | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10160 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 280.00 |
| City Atlanta | State GA | |
| Zip Code 30339 | | Bi-weekly payroll deduction - \$20 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Gentiva | Occupation AVP - Operations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 1370.00 |
| 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 25 OF 48 |
| | <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. Aimee McCorkle | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11Al.10161 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 390.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Director - Finance |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 390.00 | |
| Bi-weekly payroll deduction - \$30 | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Russ McDonough | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11Al.10162 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 1400.00 |
| 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 ▼ 1400.00 | |
| Bi-weekly payroll deduction - \$100 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Janet Miller | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11Al.10165 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 280.00 |
| 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 ▼ 280.00 | |
| Bi-weekly payroll deduction - \$20 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2070.00 |
| 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 26 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Mary Muchow

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 Director Field Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10169

Amount of Each Receipt this Period
420.00

Bi-weekly payroll deduction - \$30

Full Name (Last, First, Middle Initial)
B. Margo Nemet

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 Director Compliance Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10172

Amount of Each Receipt this Period
210.00

Bi-weekly payroll deduction - \$15

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

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 - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10173

Amount of Each Receipt this Period
420.00

Bi-weekly payroll deduction - \$30

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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 27 OF 48 |
| | <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. Derek Nordman
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 Dir - Regional Rehab

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10174

Amount of Each Receipt this Period
280.00

Bi-weekly payroll deduction - \$20

B. Laurie O'Hara
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 ▼
280.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10175

Amount of Each Receipt this Period
280.00

Bi-weekly payroll deduction - \$20

C. Martin Olson
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, Inc. Occupation AVP - Performance Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10176

Amount of Each Receipt this Period
500.00

Bi-weekly payroll deduction - \$50

SUBTOTAL of Receipts This Page (optional).....▶ 1060.00

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 28 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Charlotte Parker

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 - Hospice

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11Al.10183

Amount of Each Receipt this Period
280.00

Bi-weekly payroll deduction - \$20

Full Name (Last, First, Middle Initial)
B. Sally Parnell

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 Div VP - Clinical Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11Al.10184

Amount of Each Receipt this Period
1050.00

Bi-weekly payroll deduction - \$75

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

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 Manager Wound Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11Al.10186

Amount of Each Receipt this Period
560.00

Bi-weekly payroll deduction - \$40

SUBTOTAL of Receipts This Page (optional)..... ▶ 1890.00

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 29 OF 48 |
| | <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. Jerrold Perchik | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10187 |
| Mailing Address 3350 Riverwood Pkwy Suite 1400 | | Amount of Each Receipt this Period 700.00 |
| 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 ▼ 700.00 | |
| Bi-weekly payroll deduction - \$50 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Patricia Phillips | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10188 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 440.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Gentiva | Occupation AVP - Operations | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 440.00 | |
| Bi-weekly payroll deduction - \$40 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Leland Pierce | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10189 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 420.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Gentiva | Occupation Area Rehab Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| Bi-weekly payroll deduction - \$30 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1560.00 |
| 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 30 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Mark Pietrow

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 RVP - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
980.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10190

Amount of Each Receipt this Period
980.00

Bi-weekly payroll deduction - \$70

Full Name (Last, First, Middle Initial)
B. Perry Pruett

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 Div VP - Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10192

Amount of Each Receipt this Period
840.00

Bi-weekly payroll deduction - \$70

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

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 Director - Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.10193

Amount of Each Receipt this Period
240.00

Bi-weekly payroll deduction -

SUBTOTAL of Receipts This Page (optional)..... ▶ 2060.00

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 31 OF 48 |
| | <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. Andrew Rauch | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10194 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 420.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation Financial Analyst Reg - Sr |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| Bi-weekly payroll deduction - \$30 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Bruce Reardon | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10195 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 420.00 |
| City Atlanta | State GA | Zip Code 30339 |
| FEC ID number of contributing federal political committee. C | Name of Employer Gentiva | Occupation HR Regional Director |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| Bi-weekly payroll deduction - \$30 | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mary Jo Rinkewich | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10196 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 280.00 |
| 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| Bi-weekly payroll deduction - \$20 | | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1120.00 |
| 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 32 OF 48
(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. Julee Rose
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 Health Services Inc. Occupation Area Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10198

Amount of Each Receipt this Period
210.00

Bi-weekly payroll deduction - \$15

B. Todd Sexe
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 Health Services Inc. Occupation VP Home Health Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10199

Amount of Each Receipt this Period
1400.00

Bi-weekly payroll deduction - \$100

C. Kathleen Shanahan
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 - Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10200

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional).....▶ 1960.00

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 33 OF 48 |
| <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. Jeff Shaner | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10201 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 2100.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly payroll deduction - \$150 |
| 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 ▼ 2100.00 |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Paula Shoemaker | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10203 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 560.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly payroll deduction - \$40 |
| Name of Employer Gentiva Occupation VP - Sales Support & Marketing | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 560.00 |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Eric Slusser | | Date of Receipt MM / DD / YYYY 06 / 30 / 2013 Transaction ID : SA11AI.10206 |
| Mailing Address 3350 Riverwood Pkwy Ste 1400 | | Amount of Each Receipt this Period 2100.00 |
| City Atlanta State GA Zip Code 30339 | FEC ID number of contributing federal political committee. C | Bi-weekly payroll deduction - \$150 |
| Name of Employer Gentiva Occupation Treasurer | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2100.00 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4760.00 |
| 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 34 OF 48 |
| | <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. Susan P Smith
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 VP Clinical Practice & Research

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10207

Amount of Each Receipt this Period
1050.00

Bi-weekly payroll deduction - \$75

B. Paul Stein
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 - IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10208

Amount of Each Receipt this Period
700.00

Bi-weekly payroll deduction - \$50

C. Harmon Strange
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 Health Services Inc. Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2692.20

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10209

Amount of Each Receipt this Period
2692.20

Bi-weekly payroll deduction - \$192.30

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4442.20 |
| 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 35 OF 48 |
| | <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. Deborah Suit
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 - Training and Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10210

Amount of Each Receipt this Period
1400.00

Bi-weekly payroll deduction - \$100

B. Timothy Swann
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 Area Director Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10212

Amount of Each Receipt this Period
560.00

Bi-weekly payroll deduction - \$40

C. Trevor Sylvestre
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 Director - Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10213

Amount of Each Receipt this Period
490.00

Bi-weekly payroll deduction - \$35

SUBTOTAL of Receipts This Page (optional)..... ▶ 2450.00

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 36 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Linda Trelstad

Mailing Address 3350 Riverwood Pkwy
 Suite 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Occupation Dir - FSU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10215

Amount of Each Receipt this Period
 210.00

Bi-weekly payroll deduction - \$15

Full Name (Last, First, Middle Initial)
B. Gena Wagner

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 - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10216

Amount of Each Receipt this Period
 700.00

Bi-weekly payroll deduction - \$50

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

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, Inc. Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : SA11AI.10217

Amount of Each Receipt this Period
 350.00

Bi-weekly payroll deduction - \$25

SUBTOTAL of Receipts This Page (optional)..... ▶ 1260.00

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 37 OF 48 |
| | <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. Charlotte Weaver
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 Health Services, Inc. Occupation Chief Clinical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10218

Amount of Each Receipt this Period
1600.00

Bi-weekly payroll deduction - \$100

B. Paul Weddle
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 Arear Dir - Operations (Hosp)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10219

Amount of Each Receipt this Period
210.00

Bi-weekly payroll deduction - \$15

C. 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 ▼
1050.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11Al.10220

Amount of Each Receipt this Period
1050.00

Bi-weekly payroll deduction - \$75

SUBTOTAL of Receipts This Page (optional)..... ▶ 2860.00

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 38 OF 48 |
| | <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. Joel Wherley
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 RVP - Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10222

Amount of Each Receipt this Period
700.00

Bi-weekly payroll deduction - \$50

B. Melissa Wilbanks
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 ▼
350.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10224

Amount of Each Receipt this Period
350.00

Bi-weekly payroll deduction - \$25

C. 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 ▼
910.00

Date of Receipt
06 / 30 / 2013
Transaction ID : SA11AI.10225

Amount of Each Receipt this Period
910.00

Bi-weekly payroll deduction - \$70

SUBTOTAL of Receipts This Page (optional).....▶ 1960.00

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 39 OF 48
(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. Douglas Wray
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 ▼ **650.00**

Date of Receipt **06 / 30 / 2013**
Transaction ID : SA11AI.10229

Amount of Each Receipt this Period **650.00**

Bi-weekly payroll deduction - \$50

B.
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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 650.00 |
| TOTAL This Period (last page this line number only).....▶ | 65084.20 |

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

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

FOR LINE NUMBER: PAGE 40 OF 48
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. FRIENDS OF MAX BAUCUS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 586
 City HELENA State MT Zip Code 59624
 FEC ID number of contributing federal political committee. **C** C00328211
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2013
Transaction ID : SA16.10047
 Amount of Each Receipt this Period
 5000.00
 Refund of contribution made 5/31/12 - check #1276

B.
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

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

**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"/> 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. Bank of America

Mailing Address P O Box 798

City State Zip Code
Wichita KS 67201

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2013

Transaction ID : SB21B.10372

Amount of Each Disbursement this Period

45.63

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) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

45.63

45.63

**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. AL FRANKEN FOR SENATE 2014

Mailing Address PO BOX 583144

City MINNEAPOLIS State MN Zip Code 55458

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: MN District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2013

Transaction ID : SB23.10028

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BECERRA FOR CONGRESS

Mailing Address P.O. BOX 261060

City LOS ANGELES State CA Zip Code 90026

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: CA District: 34

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2013

Transaction ID : SB23.10014

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: MD District: 03

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2013

Transaction ID : SB23.10030

Amount of Each Disbursement this Period

5000.00

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

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

6500.00

**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 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. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MD District: 03

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2013

Transaction ID : SB23.10031

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. COMMON GROUND PAC

Mailing Address 20 WEST MAPLE STREET

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2013

Transaction ID : SB23.10025

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COMMON GROUND PAC

Mailing Address 20 WEST MAPLE STREET

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2013

Transaction ID : SB23.10033

Amount of Each Disbursement this Period

4000.00

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

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

5300.00

**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 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. DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 2 | 9 | | 2 | 0 | 1 | 3 |

Transaction ID : SB23.10035

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Mailing Address 120 MARYLAND AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 0 | 9 | | 2 | 0 | 1 | 3 |

Transaction ID : SB23.10027

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 7 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City GALLATIN State TN Zip Code 37066

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 6 | | 2 | 0 | 1 | 3 |

Transaction ID : SB23.10037

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

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

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 9 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
| | | | | | | | | | |

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

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Detailed Summary Page

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| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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. FRIENDS FOR HARRY REID

Mailing Address P.O. BOX 19163

City LAS VEGAS State NV Zip Code 89132

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NV District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2013

Transaction ID : SB23.10032

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DICK DURBIN

Mailing Address PO BOX 1949

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IL District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2013

Transaction ID : SB23.10017

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

STENY HAMILTON HOYER

Office Sought: House
 Senate
 President
State: MD District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2013

Transaction ID : SB23.10034

Amount of Each Disbursement this Period

2500.00

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

8000.00

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"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)

A. LEADERSHIP OF TODAY AND TOMORROW

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 30 | | 2013 |

Mailing Address 700 13TH STREET, NW
SUITE 600

Transaction ID : SB23.10362

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Purpose of Disbursement
Check #1293 never cashed. Reported on the September 2012 monthly FEC file

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MCKINLEY FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 21 | | 2013 |

Mailing Address PO BOX 642

Transaction ID : SB23.10024

City MORGANTOWN State WV Zip Code 26507

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 01

Full Name (Last, First, Middle Initial)

C. MCKINLEY FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 29 | | 2013 |

Mailing Address PO BOX 642

Transaction ID : SB23.10036

City MORGANTOWN State WV Zip Code 26507

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement

| |
|--|
| |
|--|

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 01

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

| |
|---------|
| 1000.00 |
|---------|

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

| |
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| |
|--|

**SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Full Name (Last, First, Middle Initial)

A. MCKINLEY FOR CONGRESS

Mailing Address PO BOX 642

City MORGANTOWN State WV Zip Code 26507

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WV District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : SB23.10361

Amount of Each Disbursement this Period

2100.00

Full Name (Last, First, Middle Initial)

B. PRICE FOR CONGRESS

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2013

Transaction ID : SB23.10012

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. PRICE FOR CONGRESS

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2013

Transaction ID : SB23.10013

Amount of Each Disbursement this Period

5000.00

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

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

12100.00

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

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| <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. RE-ELECT MCGOVERN COMMITTEE

Mailing Address PO Box 60405
PO Box 60405

City Worcester State MA Zip Code 01606

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 25 | / | 2013 |

Transaction ID : SB23.10044

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. STABENOW WYDEN VICTORY FUND

Mailing Address 600 PENNSYLVANIA AVE SE SUITE 210

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | / | 19 | / | 2013 |

Transaction ID : SB23.10365

Amount of Each Disbursement this Period

| |
|----------|
| 12000.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. TEXANS FOR SENATOR JOHN CORNYN INC

Mailing Address PO BOX 13026

City AUSTIN State TX Zip Code 78711

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TX District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 25 | / | 2013 |

Transaction ID : SB23.10022

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

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

| |
|----------|
| 13500.00 |
|----------|

| |
|----------|
| 55450.00 |
|----------|