

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

ADDRESS (number and street) 3350 RIVERWOOD PKWY
SUITE 1400
 Check if different than previously reported. (ACC)
ATLANTA GA 30339

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly 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 (12G)
Election on 05 18 2010 in the State of AR
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2010 through 04 28 2010

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 Electronically Filed by Eric Slusser Date 04 29 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		17635.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	33306.97									
(c) Total Receipts (from Line 19)	5205.15	40043.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	38512.12	57679.42								
7. Total Disbursements (from Line 31)	2000.00	21167.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36512.12	36512.12								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

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)	3595.30	25495.80
(ii) Unitemized	1609.85	14548.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5205.15	40043.90
(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)	5205.15	40043.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	5205.15	40043.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5205.15	40043.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	167.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	167.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	21000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2000.00	21167.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	21167.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 27

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	5205.15	40043.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5205.15	40043.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	167.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	167.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) John Aurelio	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6099
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey Barr	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6104
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 50.00
	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 ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mara Benner	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6107
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 1200.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 27
	<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	

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

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

A.	Full Name (Last, First, Middle Initial) Joseph Bettini	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6110
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Director Operations Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

B.	Full Name (Last, First, Middle Initial) Cathy Blanchard	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3 Huntington Quadrangle Suite 200S	Transaction ID: SA11AI.6111
	City Melville State NY Zip Code 11747	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Area Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 240.00	

C.	Full Name (Last, First, Middle Initial) Adam Brooks	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6114
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation Director - Regional Rehab Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 210.00	

SUBTOTAL of Receipts This Page (optional)	125.00
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 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Robert Brunson	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6115
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation AVP - Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) David Causby	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6125
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 100.00
	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 ▼ 620.00	

C.	Full Name (Last, First, Middle Initial) Julie Conway	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6128
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Occupation AVP - Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	180.00
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 / 27
(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

A. Full Name (Last, First, Middle Initial)
David Cygan

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 ▼ 228.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6136
Amount of Each Receipt this Period 38.00

B. Full Name (Last, First, Middle Initial)
Douglas Dahlgard

Mailing Address 3350 Riverwood Pkwy
Ste 1400

City Atlanta State GA Zip Code 30339

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

Name of Employer Gentiva Health Services Inc. Occupation Vice President Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6137
Amount of Each Receipt this Period 35.00

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

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 - Hospice

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6139
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 173.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27		
	<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

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

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

A.	Full Name (Last, First, Middle Initial) Rexanne Domico	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6141
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation VP Gentiva Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Indy Edwards	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6145
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 70.00
	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 ▼ 420.00	

C.	Full Name (Last, First, Middle Initial) Philip Filippelli	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6149
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation VP - Appl Dev & Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	145.00
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 11 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Dave Gieringer		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6151
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Gentiva Health Services Inc.	Occupation Vice President Acctg / Controller	Aggregate Year-to-Date 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Michael Grieco		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6156
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva Health Services Inc.	Occupation AVP - Finance	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Lisa Grilli		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6157
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation AVP - Sales	Aggregate Year-to-Date 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	155.00
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 12 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Nancy Guerland		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6158
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation AVP - Operations	Aggregate Year-to-Date ▼ 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) John Hamilton		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6165
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation VP - Compliance	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Jane Heideman		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6169
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Gentiva Health Services Inc.	Occupation AVP - Accounting	Aggregate Year-to-Date ▼ 245.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	135.00
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 13 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Timothy Hock		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6171
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation AVP - Operations	Aggregate Year-to-Date 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Monica Hullinger		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6174
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva Health Services, Inc.	Occupation VP - Home Health Operations	Aggregate Year-to-Date 280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mark Hunt		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6175
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation RVP - Sales	Aggregate Year-to-Date 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	130.00
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 14 / 27
(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

A. Full Name (Last, First, Middle Initial)
Jorie Jacobs

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 ▼ 300.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6176
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mary Jalwan

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 RVP Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6177
Amount of Each Receipt this Period 60.00

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

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 ▼ 300.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6181
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Rebecca Knight		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6187
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
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 ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) James Lee III		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6278
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Gentiva	Occupation VP - Nat'l Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C.

Full Name (Last, First, Middle Initial) JoAnne Little		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6192
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Gentiva Health Services Inc.	Occupation Asst General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	140.00
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 16 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Robert Little		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6193
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation RVP - Sales	Aggregate Year-to-Date ▼ 264.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Michele Lovato		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6194
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Gentiva	Occupation Finance Director	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Christopher Macinnis		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6195
City Atlanta	State Zip Code GA 30339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Gentiva	Occupation RVP - Operations	Aggregate Year-to-Date ▼ 360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	150.00
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 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Ronald Malone		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6197
Name of Employer Gentiva Health Services Inc.		Occupation Chairman / Chief Executive Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1140.00	190.00

B.	Full Name (Last, First, Middle Initial) Robert Maynard		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6201
Name of Employer Gentiva		Occupation AVP - Operations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	50.00

C.	Full Name (Last, First, Middle Initial) Barbara Moyer		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6209
Name of Employer Gentiva		Occupation AVP - Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	50.00

SUBTOTAL of Receipts This Page (optional)	▶	290.00
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 18 / 27
(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

A. Full Name (Last, First, Middle Initial)
Constance Mrosek

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 ▼ 300.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6210
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
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 ▼ 220.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6211
Amount of Each Receipt this Period 30.00

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

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 ▼ 600.00

Date of Receipt 04 / 09 / 2010
Transaction ID: SA11AI.6215
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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 / 27
	<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	

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

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

A.	Full Name (Last, First, Middle Initial) Stephen Paige	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6222
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Senior Vice President/General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) Benjamin Peirce	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6224
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Health Services Inc. Occupation Manager Wound Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Patricia Phillips	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6225
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	140.00
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 20 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Samuel Proctor		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6229
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation AVP - Benefits & HR Svc Ctr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Elizabeth Scanlon		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6239
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
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 ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) Todd Sexe		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6240
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva Health Services Inc.	Occupation VP Home Health Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

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

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

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

FOR LINE NUMBER: PAGE 21 / 27
(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

A. Full Name (Last, First, Middle Initial)
Jeff Shaner

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 of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 04 / 09 / 2010
Transaction ID: SA11AI.6242
 Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Paula Shoemaker

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 - Sales Support & Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 09 / 2010
Transaction ID: SA11AI.6244
 Amount of Each Receipt this Period: 40.00

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

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 Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 04 / 09 / 2010
Transaction ID: SA11AI.6247
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 290.00

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 22 / 27
	<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	

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

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

A.	Full Name (Last, First, Middle Initial) Joey Spearman	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6251
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 40.00
	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 240.00	

B.	Full Name (Last, First, Middle Initial) Eugenia Spencer	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6252
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation SVP - Shared Svcs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

C.	Full Name (Last, First, Middle Initial) Frederick Spight	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6253
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Gentiva Occupation AVP - Purchasing & Supply Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 270.00	

SUBTOTAL of Receipts This Page (optional)	135.00
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 23 / 27
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

Full Name (Last, First, Middle Initial)
Paul Stein

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.6254

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Harmon Strange

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 ▼ 1153.80

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.6256

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
Timothy Swann

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 ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.6258

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 282.30

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 24 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial) Trevor Sylvestre		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6259
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
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 ▼ 230.00	

B.

Full Name (Last, First, Middle Initial) Gordon Thoennes		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6261
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Gentiva	Occupation RVP - Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) Gena Wagner		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6268
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 25 / 27
(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

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

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

A.

Full Name (Last, First, Middle Initial)
Charlotte Weaver

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 ▼ 750.00

Date of Receipt 04 / 09 / 2010

Transaction ID: SA11AI.6269

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Cheryl White

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 ▼ 320.00

Date of Receipt 04 / 09 / 2010

Transaction ID: SA11AI.6271

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Douglas Wray

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 ▼ 300.00

Date of Receipt 04 / 09 / 2010

Transaction ID: SA11AI.6275

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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 / 27	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Michael Young		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6277
	Atlanta	GA	30339	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		100.00	
Name of Employer Gentiva Health Services Inc.		Occupation RVP - Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 530.00		

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	3595.30

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

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

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

A.	Full Name (Last, First, Middle Initial) BART GORDON Mailing Address 940 EAST NORTHFIELD BOULEVARD City MURFREESBORO State TN Zip Code 37130 Purpose of Disbursement Check 1110 dated 12/03/2009 returned Candidate Name BART GORDON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6286 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period -1000.00
B.	Full Name (Last, First, Middle Initial) CHARLES E GRASSLEY Mailing Address PO BOX 1000 City DES MOINES State IA Zip Code 50304 Purpose of Disbursement Candidate Name CHARLES E GRASSLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6132 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 1 0	Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) MICHAEL AVERY ROSS Mailing Address PO Box 360 PO BOX 374 City Prescott State AR Zip Code 71857 Purpose of Disbursement Candidate Name MICHAEL AVERY ROSS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6093 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	2000.00