

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 06 08 2010 in the State of NV
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 29 2010 through 05 19 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 05 19 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									
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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
2	9

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
1	9

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	36512.12									
(c) Total Receipts (from Line 19)	10267.30	50311.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46779.42	67946.72								
7. Total Disbursements (from Line 31)	4110.11	25277.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42669.31	42669.31								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC

Report Covering the Period: From:

M	M
0	4

D	D
2	9

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
1	9

Y	Y	Y	Y
2	0	1	0

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)	7753.30	33249.10
(ii) Unitemized	2514.00	17062.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10267.30	50311.20
(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)	10267.30	50311.20
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))	10267.30	50311.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10267.30	50311.20

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.....	110.11	277.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	110.11	277.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	25000.00
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))..	4110.11	25277.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4110.11	25277.41

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	10267.30	50311.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10267.30	50311.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	110.11	277.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	110.11	277.41

**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 / 31
	<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) John Aurelio	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6298
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$40
	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 350.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey Barr	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6302
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$50
	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 400.00	

C.	Full Name (Last, First, Middle Initial) Mara Benner	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6305
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$150
	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 1500.00	

SUBTOTAL of Receipts This Page (optional)	480.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 31
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

<p>A. Full Name (Last, First, Middle Initial) Susan Benoit</p> <p>Mailing Address 3350 Riverwood Pkwy Ste 1400</p> <p>City Atlanta State GA Zip Code 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Gentiva Occupation RVP - Sales</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6306</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Bi-weekly payroll deducti- on \$30</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	9	/	2	0	1	0												

<p>B. Full Name (Last, First, Middle Initial) Joseph Bettini</p> <p>Mailing Address 3350 Riverwood Pkwy Ste 1400</p> <p>City Atlanta State GA Zip Code 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Gentiva Occupation Director Operations Development</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6308</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Bi-weekly payroll deducti- on \$50</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	9	/	2	0	1	0												

<p>C. Full Name (Last, First, Middle Initial) Cathy Blanchard</p> <p>Mailing Address 3 Huntington Quadrangle Suite 200S</p> <p>City Melville State NY Zip Code 11747</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Gentiva Health Services Inc. Occupation Area Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>	<p>Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6309</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Bi-weekly payroll deducti- on \$40</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	9	/	2	0	1	0												

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

**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 / 31
	<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.	Full Name (Last, First, Middle Initial) Adam Brooks		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 0 5 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6312
Name of Employer Gentiva		Occupation Director - Regional Rehab	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 ▼ 280.00	<input type="text"/> 70.00
			Bi-weekly payroll deduction \$35

B.	Full Name (Last, First, Middle Initial) Robert Brunson		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 0 5 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6313
Name of Employer Gentiva Health Services Inc.		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 ▼ 350.00	<input type="text"/> 80.00
			Bi-weekly payroll deduction \$40

C.	Full Name (Last, First, Middle Initial) John Camperlengo		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 0 5 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Atlanta	GA	33039
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6316
Name of Employer Gentiva Health Services, Inc.		Occupation SVP, CCO & Deputy General Counsel	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 ▼ 250.00	<input type="text"/> 50.00
			Bi-weekly payroll deduction \$25

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 31
	<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.	Full Name (Last, First, Middle Initial) David Causby	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6321
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$100
	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 820.00	

B.	Full Name (Last, First, Middle Initial) Julie Conway	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6324
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$40
	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 320.00	

C.	Full Name (Last, First, Middle Initial) David Cygan	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6330
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$38
	Name of Employer Gentiva Occupation VP - Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 304.00	

SUBTOTAL of Receipts This Page (optional)	356.00
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 / 31
	<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.	Full Name (Last, First, Middle Initial) Douglas Dahlgard		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6331
Name of Employer Gentiva Health Services Inc.		Occupation Vice President Tax	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 ▼ 350.00	<input type="text"/> 70.00
			Bi-weekly payroll deduction \$35

B.	Full Name (Last, First, Middle Initial) John Destefanis		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6333
Name of Employer Gentiva		Occupation RVP - Hospice	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 ▼ 800.00	<input type="text"/> 200.00
			Bi-weekly payroll deduction \$100

C.	Full Name (Last, First, Middle Initial) Rexanne Domico		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code
	Atlanta	GA	30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6335
Name of Employer Gentiva Health Services Inc.		Occupation VP Gentiva Consulting	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	<input type="text"/> 70.00
			Bi-weekly payroll deduction \$35

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 340.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 31
	<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.	Full Name (Last, First, Middle Initial) Indy Edwards		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 0 5 / 1 9 / 2 0 1 0
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6338
Name of Employer Gentiva		Occupation AVP - Operations	Amount of Each Receipt this Period 140.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 560.00	Bi-weekly payroll deducti- on \$70

B.	Full Name (Last, First, Middle Initial) Mary Elkin		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy		<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 0 5 / 1 9 / 2 0 1 0
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6339
Name of Employer Gentiva		Occupation AVP - Sales Support	Amount of Each Receipt this Period 80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	Bi-weekly payroll deducti- on \$40

C.	Full Name (Last, First, Middle Initial) Julie Erickson		Date of Receipt
	Mailing Address 3 Huntington Quadrangle Suite 200S		<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 0 5 / 1 9 / 2 0 1 0
	City Melville	State NY	Zip Code 11747
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6340
Name of Employer Gentiva Health Services Inc.		Occupation Reg Director - Clinical Operations	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	Bi-weekly payroll deducti- on \$25

SUBTOTAL of Receipts This Page (optional)	270.00
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 / 31
(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)
Philip Filippelli

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 - Appl Dev & Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6342

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

B. Full Name (Last, First, Middle Initial)
Dave Gieringer

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 Acctg / Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6344

Amount of Each Receipt this Period 150.00

Bi-weekly payroll deduction \$75

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

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 - Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6349

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

SUBTOTAL of Receipts This Page (optional) ► 310.00

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 / 31
(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. Full Name (Last, First, Middle Initial)
Lisa Grilli

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 ▼ 320.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6350

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

B. Full Name (Last, First, Middle Initial)
Nancy Guerland

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 ▼ 360.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6351

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

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

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 - Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6356

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

SUBTOTAL of Receipts This Page (optional) ► 260.00

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 / 31
(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.

Full Name (Last, First, Middle Initial) Teresa Harrell		Date of Receipt MM / DD / YYYY 05 / 19 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6358
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Gentiva	Occupation Regional Director - HR	Bi-weekly payroll deduction \$30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Jane Heideman		Date of Receipt MM / DD / YYYY 05 / 19 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6361
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer Gentiva Health Services Inc.	Occupation AVP - Accounting	Bi-weekly payroll deduction \$45
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

C.

Full Name (Last, First, Middle Initial) Timothy Hock		Date of Receipt MM / DD / YYYY 05 / 19 / 2010
Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6363
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Gentiva	Occupation AVP - Operations	Bi-weekly payroll deduction \$50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
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 / 31
(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. Full Name (Last, First, Middle Initial)
Ann Hodges

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 HR Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 19 / 2010
Transaction ID: SA11AI.6364
Amount of Each Receipt this Period 60.00
Bi-weekly payroll deduction \$30

B. Full Name (Last, First, Middle Initial)
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 ▼ 360.00

Date of Receipt 05 / 19 / 2010
Transaction ID: SA11AI.6367
Amount of Each Receipt this Period 80.00
Bi-weekly payroll deduction \$40

C. Full Name (Last, First, Middle Initial)
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 ▼ 320.00

Date of Receipt 05 / 19 / 2010
Transaction ID: SA11AI.6368
Amount of Each Receipt this Period 80.00
Bi-weekly payroll deduction \$40

SUBTOTAL of Receipts This Page (optional) ► 220.00

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 / 31
	<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.	Full Name (Last, First, Middle Initial) Jorie Jacobs		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6369		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$50		
	Name of Employer Gentiva	Occupation AVP - Operations		Aggregate Year-to-Date 400.00	

B.	Full Name (Last, First, Middle Initial) Mary Jalwan		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6370		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 120.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$60		
	Name of Employer Gentiva Health Services Inc.	Occupation RVP Sales		Aggregate Year-to-Date 520.00	

C.	Full Name (Last, First, Middle Initial) John Karr		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6374		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$50		
	Name of Employer Gentiva	Occupation VP - Compensation & Benefits		Aggregate Year-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	320.00
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 17 / 31
(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. Full Name (Last, First, Middle Initial)
Debbie Ann Kearns

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 ▼ 240.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6375

Amount of Each Receipt this Period 60.00

Bi-weekly payroll deduction \$30

B. Full Name (Last, First, Middle Initial)
Rebecca Knight

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 ▼ 320.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6379

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

C. Full Name (Last, First, Middle Initial)
James Lee III

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 - Nat'l Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6382

Amount of Each Receipt this Period 140.00

Bi-weekly payroll deduction \$70

SUBTOTAL of Receipts This Page (optional) ► 280.00

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 / 31
(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

<p>A. Full Name (Last, First, Middle Initial) JoAnne Little</p> <p>Mailing Address 3350 Riverwood Pkwy Ste 1400</p> <p>City Atlanta State GA Zip Code 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Gentiva Health Services Inc. Occupation: Asst General Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 19 / 2010</p> <p>Transaction ID: SA11AI.6384</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Bi-weekly payroll deduction \$30</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Robert Little</p> <p>Mailing Address 3350 Riverwood Pkwy Ste 1400</p> <p>City Atlanta State GA Zip Code 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Gentiva Occupation: RVP - Sales</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 344.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 19 / 2010</p> <p>Transaction ID: SA11AI.6385</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Bi-weekly payroll deduction \$40</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Michele Lovato</p> <p>Mailing Address 3350 Riverwood Pkwy Ste 1400</p> <p>City Atlanta State GA Zip Code 30339</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Gentiva Occupation: Finance Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 19 / 2010</p> <p>Transaction ID: SA11AI.6386</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Bi-weekly payroll deduction \$50</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>240.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 31
(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.	Full Name (Last, First, Middle Initial) Christopher Macinnis		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6387		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 120.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$60		
	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 ▼ 480.00			

B.	Full Name (Last, First, Middle Initial) Ronald Malone		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6389		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 380.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$190		
	Name of Employer Gentiva Health Services Inc.		Occupation Chairman / Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1520.00			

C.	Full Name (Last, First, Middle Initial) Robert Maynard		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6394		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$50		
	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 ▼ 400.00			

SUBTOTAL of Receipts This Page (optional)	▶	600.00
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 / 31
	<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.	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 0 5 / 1 9 / 2 0 1 0
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6401
	Amount of Each Receipt this Period		<input type="text"/> 100.00
Name of Employer Gentiva		Occupation AVP - Sales	Bi-weekly payroll deduction \$50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) Constance Mrosek		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 0 5 / 1 9 / 2 0 1 0
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6402
	Amount of Each Receipt this Period		<input type="text"/> 100.00
Name of Employer Gentiva		Occupation AVP - Operations	Bi-weekly payroll deduction \$50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 400.00	

C.	Full Name (Last, First, Middle Initial) Mary Muchow		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 0 5 / 1 9 / 2 0 1 0
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6403
	Amount of Each Receipt this Period		<input type="text"/> 60.00
Name of Employer Gentiva Health Services Inc.		Occupation Director Field Audit	Bi-weekly payroll deduction \$30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 280.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 260.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 31
(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.	Full Name (Last, First, Middle Initial) Deana Murphy		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6404		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25		
	Name of Employer Gentiva Health Services Inc.		Occupation Branch Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) Karen Negri		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6407		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$25		
	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 ▼ 725.00			

C.	Full Name (Last, First, Middle Initial) Stephen Paige		Date of Receipt MM / DD / YYYY 05 / 19 / 2010		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		Transaction ID: SA11AI.6415		
	City Atlanta	State GA	Zip Code 30339	Amount of Each Receipt this Period 120.00	
	FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction \$60		
	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 ▼ 600.00			

SUBTOTAL of Receipts This Page (optional)	▶	295.00
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 / 31
	<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.	Full Name (Last, First, Middle Initial) Benjamin Peirce		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6417
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer Gentiva Health Services Inc.		Occupation Manager Wound Care		Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00		

B.	Full Name (Last, First, Middle Initial) Patricia Phillips		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6418
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer Gentiva		Occupation AVP - Operations		Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00		

C.	Full Name (Last, First, Middle Initial) Samuel Proctor		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6422
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer Gentiva		Occupation AVP - Benefits & HR Svc Ctr		Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00		

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 23 / 31
	<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.	Full Name (Last, First, Middle Initial) Cecille Riggs		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6427
	Amount of Each Receipt this Period		<input type="text"/> 60.00
Name of Employer Gentiva		Occupation Director Regional Rehab	Bi-weekly payroll deduction \$30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	

B.	Full Name (Last, First, Middle Initial) Mary Jo Rinkewich		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6428
	Amount of Each Receipt this Period		<input type="text"/> 57.70
Name of Employer Gentiva		Occupation AVP - Sales	Bi-weekly payroll deduction \$28.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 230.80	

C.	Full Name (Last, First, Middle Initial) Elizabeth Scanlon		Date of Receipt
	Mailing Address 3350 Riverwood Pkwy Ste 1400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 19 / 2010
	City Atlanta	State GA	Zip Code 30339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6432
	Amount of Each Receipt this Period		<input type="text"/> 80.00
Name of Employer Gentiva		Occupation AVP - Operations	Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 320.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 197.70
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 31
	<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.	Full Name (Last, First, Middle Initial) Todd Sexe		Date of Receipt		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0		
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.6433	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00		
	Name of Employer Gentiva Health Services Inc.	Occupation VP Home Health Operations	Bi-weekly payroll deduction \$40		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

B.	Full Name (Last, First, Middle Initial) Jeff Shaner		Date of Receipt		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0		
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.6435	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00		
	Name of Employer Gentiva	Occupation Division VP of Operations	Bi-weekly payroll deduction \$150		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00			

C.	Full Name (Last, First, Middle Initial) Paula Shoemaker		Date of Receipt		
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0		
	City Atlanta	State GA	Zip Code 30339	Transaction ID: SA11AI.6437	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00		
	Name of Employer Gentiva	Occupation VP - Sales Support & Marketing	Bi-weekly payroll deduction \$40		
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)	▶	460.00
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 / 31
	<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.	Full Name (Last, First, Middle Initial) Eric Slusser	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6440
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$100
	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 800.00	

B.	Full Name (Last, First, Middle Initial) Ruth Smith	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6442
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$25
	Name of Employer Gentiva Occupation Branch Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Joey Spearman	Date of Receipt MM / DD / YYYY 05 / 19 / 2010
	Mailing Address 3350 Riverwood Pkwy Ste 1400	Transaction ID: SA11AI.6443
	City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction \$40
	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 320.00	

SUBTOTAL of Receipts This Page (optional)	330.00
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 / 31
(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. Full Name (Last, First, Middle Initial)
Eugenia Spencer

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 SVP - Shared Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6444

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

B. Full Name (Last, First, Middle Initial)
Frederick Spight

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 - Purchasing & Supply Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6445

Amount of Each Receipt this Period 90.00

Bi-weekly payroll deduction \$45

C. 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 ▼ 400.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6446

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

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 27 / 31
	<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.	Full Name (Last, First, Middle Initial) Harmon Strange		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6448
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		384.60	
Name of Employer Gentiva Health Services Inc.		Occupation President & CEO		Bi-weekly payroll deduction \$192.30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1538.40		

B.	Full Name (Last, First, Middle Initial) Timothy Swann		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6450
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer Gentiva		Occupation Area Director Sales		Bi-weekly payroll deduction \$40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00		

C.	Full Name (Last, First, Middle Initial) Trevor Sylvestre		Date of Receipt	
	Mailing Address 3350 Riverwood Pkwy Ste 1400		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.6451
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		70.00	
Name of Employer Gentiva		Occupation Director - Finance		Bi-weekly payroll deduction \$35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	534.60
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 28 / 31
(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. Full Name (Last, First, Middle Initial)
Gordon Thoennes

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 ▼ 320.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6453

Amount of Each Receipt this Period 80.00

Bi-weekly payroll deduction \$40

B. Full Name (Last, First, Middle Initial)
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 ▼ 430.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6459

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

C. 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 ▼ 950.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6460

Amount of Each Receipt this Period 200.00

Bi-weekly payroll deduction \$100

SUBTOTAL of Receipts This Page (optional) ► 380.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 31
(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. 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 ▼ 420.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6462

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

B. 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 ▼ 400.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6466

Amount of Each Receipt this Period 100.00

Bi-weekly payroll deduction \$50

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

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 ▼ 730.00

Date of Receipt 05 / 19 / 2010

Transaction ID: SA11AI.6468

Amount of Each Receipt this Period 200.00

Bi-weekly payroll deduction \$100

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

TOTAL This Period (last page this line number only) ▶ 7753.30

**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)

PAGE 30 / 31

<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

A.	Full Name (Last, First, Middle Initial) GENTIVA HEALTH SERVICES INC PAC GENTIVAPAC			Transaction ID: SB21B.6470 Date of Disbursement																				
	Mailing Address 3350 RIVERWOOD PKWY SUITE 1400			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		1	9		2	0	1	0															
	City ATLANTA	State GA	Zip Code 30339	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Bank fees			<table border="1"> <tr> <td>110.11</td> </tr> </table>		110.11																		
110.11																								
	Candidate Name																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
	State: District:	Category/ Type																						

SUBTOTAL of Disbursements This Page (optional)	▶	110.11
TOTAL This Period (last page this line number only)	▶	110.11

**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)

PAGE 31 / 31

<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

A.	Full Name (Last, First, Middle Initial) BLANCHE LAMBERT LINCOLN	Transaction ID: SB23.6294 Date of Disbursement 05 / 12 / 2010
	Mailing Address 707 PLEASANT VALLEY DRIVE #20	Amount of Each Disbursement this Period 1000.00
	City LITTLE ROCK State AR Zip Code 72212	
	Purpose of Disbursement	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HARRY REID	Transaction ID: SB23.6291 Date of Disbursement 04 / 30 / 2010
	Mailing Address PO BOX 19163	Amount of Each Disbursement this Period 1500.00
	City LAS VEGAS State NV Zip Code 89132	
	Purpose of Disbursement	003 Category/ Type
	Candidate Name HARRY REID	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MICHAEL AVERY ROSS	Transaction ID: SB23.6293 Date of Disbursement 04 / 30 / 2010
	Mailing Address PO Box 360 PO BOX 374	Amount of Each Disbursement this Period 1500.00
	City Prescott State AR Zip Code 71857	
	Purpose of Disbursement	003 Category/ Type
	Candidate Name	
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	4000.00