

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Gulf Coast Bank & Trust WAVE PAC

ADDRESS (number and street) 201 N CARROLLTON AVE Check if different than previously reported. (ACC) NEW ORLEANS LA 70119

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00496588 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 10 / 01 / 2020 through 11 / 23 / 2020

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

Signature of Treasurer LITTLEFIELD, GARY, , , [Electronically Filed] Date 11 / 29 / 2020

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Gulf Coast Bank & Trust WAVE PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		21853.65
(b) Cash on Hand at Beginning of Reporting Period.....	802.10	
(c) Total Receipts (from Line 19) .....	3043.74	20643.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3845.84	42497.49
7. Total Disbursements (from Line 31).....	4.85	38656.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3840.99	3840.99
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**Gulf Coast Bank & Trust WAVE PAC**

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).....	2550.00	10205.00
(ii) Unitemized .....	487.00	10290.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3037.00	20495.50
(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) .....	3037.00	20495.50
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.).....	6.74	148.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3043.74	20643.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3043.74	20643.84

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4.85	56.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4.85	56.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	38600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4.85	38656.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4.85	38656.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3037.00	20495.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3037.00	20495.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4.85	56.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4.85	56.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. AROCHA, ROXANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 LONGWOOD DRIVE  
 City MARRERO State LA Zip Code 70072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BRANCH MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13285**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**B. BENEFIELD, THOMAS RANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 73507 PLANTATION STREET  
 City COVINGTON State LA Zip Code 70435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13286**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**C. BOGGS, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15197 AMANDA DRIVE  
 City GONZALES State LA Zip Code 70737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13287**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. BORDELON, HART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1409 UNIVERSITY DRIVE  
 City HAMMOND State LA Zip Code 70401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MARKET PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13288**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**B. CALDWELL, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4843 CHESTNUT STREET  
 City NEW ORLEANS State LA Zip Code 70115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) VP COMPLIANCE/CR ADM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13289**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**C. CARTER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 MADERA CT.  
 City KENNER State LA Zip Code 70065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13290**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<b>TOTAL</b> 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 8 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. CARVER, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 CARRIAGE LANE  
 City MANDEVILLE State LA Zip Code 70471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST HR DIRECTOR/VP GOV. RELATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2020  
**Transaction ID : SA11AI.13302**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item  
 \$15.00/BI-WEEKLY PAYROLL

**B. CZERNIAK, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 WEBSTER STREET  
 City NEW ORLEANS State LA Zip Code 70118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST SR VP OF OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2020  
**Transaction ID : SA11AI.13314**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 \$50.00/BI-WEEKLY PAYROLL

**C. DASTE, JOEL, , , Sr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 HERON LANE  
 City MANDEVILLE State LA Zip Code 70471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST DIVISION PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2020  
**Transaction ID : SA11AI.13304**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item  
 \$20.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	340.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 17  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. DELGADO, IVETTE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3521 JUDY DRIVE  
City MERE AUX   State LA   Zip Code 70075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) GULF COAST BANK & TRUST   Occupation (for Individual) MTG LOAN ORIGINATOR  
Receipt For:  Primary    General    Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13291**  
Amount of Each Receipt this Period 40.00  
 Memo Item  
\$10.00/BI-WEEKLY PAYROLL

**B. DICKEY, STEPHEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 203 FOREST OAKS DR.  
City NEW ORLEANS   State LA   Zip Code 70131  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) GULF COAST BANK & TRUST   Occupation (for Individual) CONSUMER BANKING EXECUTIVE  
Receipt For:  Primary    General    Other (specify) ▼  
Aggregate Year-to-Date ▼ 805.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13313**  
Amount of Each Receipt this Period 140.00  
 Memo Item  
\$35.00/BI-WEEKLY PAYROLL

**C. FALKENSTEIN, BRUCE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 20 BEECHWOOD GARDENS DRIVE  
City COVINGTON   State LA   Zip Code 70435  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) GULF COAST BANK & TRUST   Occupation (for Individual) EXEC VP COMMERCIAL LENDING  
Receipt For:  Primary    General    Other (specify)  
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13305**  
Amount of Each Receipt this Period 80.00  
 Memo Item  
\$20.00/BI-WEEKLY PAYROLL

**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: (check only one)	PAGE 10 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. FAMULARO, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 822 N. TURNBULL DR.  
 City METAIRIE    State LA    Zip Code 70001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13292**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**B. FERNANDEZ, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 237 LILLYBANK DRIVE  
 City BELLE CHASSE    State LA    Zip Code 70037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) MTG LOAN ORIGINATOR  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13306**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 \$20.00/BI-WEEKLY PAYROLL

**C. FINN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 LEIGHTON STREET  
 City GRETNA    State LA    Zip Code 70053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) SENIOR CREDIT OFFICER  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13310**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \$25.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	220.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. GUIDRY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 471 TOPAZ STREET  
 City NEW ORLEANS    State LA    Zip Code 70124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) SALES DEVELOPMENT OFFICER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 287.50

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13301**  
 Amount of Each Receipt this Period 50.00  
 Memo Item \$12.50/BI-WEEKLY PAYROLL

**B. HEIDEN, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 OLIVE AVE  
 City HARVEY    State LA    Zip Code 70058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.13282**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. HEIDEN, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 OLIVE AVE  
 City HARVEY    State LA    Zip Code 70058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST    Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13284**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. HERRMANN, DONNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 FOREST RIDGE BLVD  
 City PEARL RIVER State LA Zip Code 70452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13293**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**B. HLADKY, WADE MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1519 ARISTOCRAT DRIVE  
 City COVINGTON State LA Zip Code 70433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BC PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13307**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 \$20.00/BI-WEEKLY PAYROLL

**C. HOLLIER, GREGORY, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2112 METAIRIE COURT  
 City METAIRIE State LA Zip Code 70001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13308**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 \$20.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> 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 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. JONES, MILLICENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 GRAND CAYON DRIVE  
 City NEW ORLEANS State LA Zip Code 70131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) DR OF LEGAL REVIEW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13311**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \$25.00/BI-WEEKLY PAYROLL

**B. KYLE, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 509 MAGNOLIA LANE  
 City SLIDELL State LA Zip Code 70461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13294**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**C. LIGGANS, ALFRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 131 E GREENBRIER DRIVE  
 City NEW ORLEANS State LA Zip Code 70128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13295**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**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 14 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. LITTLEFIELD, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1165 MELANIE STREET  
 City Baton Rouge State LA Zip Code 70806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST REGIONAL COORDINATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13315**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 \$50.00/BI-WEEKLY PAYROLL

**B. MANDULA, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1355 BRIGHTWATERS BLVD., NE  
 City ST. PETERSBURG State FL Zip Code 33704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST CHIEF MARKETING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13316**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 \$50.00/BI-WEEKLY PAYROLL

**C. NICHOLS, LOUANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2940 PENWOOD DRIVE  
 City GRETNA State LA Zip Code 70056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GULF COAST BANK & TRUST CALL CENTER SUPERVISOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13296**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.00
<b>TOTAL</b> 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 15 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. OGG, THOMAS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6044 CAMP STREET

City NEW ORLEANS	State LA	Zip Code 70118
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		13		2020

**Transaction ID : SA11AI.13297**

Amount of Each Receipt this Period  
40.00

Memo Item  
\$10.00/BI-WEEKLY PAYROLL

**B. PATERNOSTRO, MICHAEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2653 DOVE AVE

City MARRERO	State LA	Zip Code 70072
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) VP OF SPECIAL ASSETS
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		13		2020

**Transaction ID : SA11AI.13298**

Amount of Each Receipt this Period  
40.00

Memo Item  
\$10.00/BI-WEEKLY PAYROLL

**C. SIMONS, SLADE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7615 JEANETTE STREET

City NEW ORLEANS	State LA	Zip Code 70118
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) EXEC VP WEALTH MANAGER
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		13		2020

**Transaction ID : SA11AI.13309**

Amount of Each Receipt this Period  
80.00

Memo Item  
\$20.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 17
	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. SPENCER, MICKEY TAYLOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 521 BATH STREET  
 City METAIRIE State LA Zip Code 70001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13299**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

**B. UZEE, JOE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5053 CRAIG AVENUE  
 City KENNER State LA Zip Code 70065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13303**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 \$15.00/BI-WEEKLY PAYROLL

**C. VAN HOVEN, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6168 CORBERT ST.  
 City NEW ORLEANS State LA Zip Code 70124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13312**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \$25.00/BI-WEEKLY PAYROLL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Gulf Coast Bank & Trust WAVE PAC**

**A. WILLIAMS, GUY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 SWALLOW ST  
 City NEW ORLEANS State LA Zip Code 70124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) PRESIDENT/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13317**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 \$50.00/BI-WEEKLY PAYROLL

**B. WRBA, STUART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1622  
 City CUMMINGS State GA Zip Code 30028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BUSINESS DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 13 / 2020  
**Transaction ID : SA11AI.13300**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 \$10.00/BI-WEEKLY PAYROLL

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

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<b>TOTAL</b> This Period (last page this line number only).....	2550.00