

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**
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 420 W. Pinhook Road
Suite A
 Check if different than previously reported. (ACC) LAFAYETTE LA 70503

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00382796 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period [07] / [01] / [2019] through [07] / [31] / [2019]

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 Simien, Albert, , ,

Signature of Treasurer *Simien, Albert, , ,* [Electronically Filed] Date [08] / [20] / [2019]

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**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

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="2019"/>		13406.03
(b) Cash on Hand at Beginning of Reporting Period.....	31687.83	
(c) Total Receipts (from Line 19)	3110.20	56704.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	34798.03	70110.03
7. Total Disbursements (from Line 31).....	0.00	35312.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	34798.03	34798.03
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

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

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).....	2464.00	46955.00
(ii) Unitemized	646.20	9749.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3110.20	56704.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3110.20	56704.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3110.20	56704.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3110.20	56704.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	35300.00
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	12.00
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)) ..	0.00	35312.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	35312.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3110.20	56704.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3110.20	56704.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Begnaud, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Bellevue Plantation Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP-Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23016
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Begnaud, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Bellevue Plantation Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP-Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23017
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Duhon, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23038
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	80.00
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 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Duhon, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23039
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

B. Dupree, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Hwy 132
 City Delhi State LA Zip Code 71232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23040
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

C. Dupree, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Hwy 132
 City Delhi State LA Zip Code 71232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23041
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Fontenot, Lessley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2303 sandalwood Drive
 City Lafayette State LA Zip Code 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23018
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Fontenot, Lessley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2303 sandalwood Drive
 City Lafayette State LA Zip Code 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23019
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Fox, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Summerland Key Lane
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) SVP Facility Based Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23056
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 9 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Fox, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Summerland Key Lane
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) SVP Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23057
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

B. Galiouras, Jules, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 Woodmont Dr.
 City Convington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23012
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

C. Galiouras, Jules, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 Woodmont Dr.
 City Convington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23013
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 23
<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Gray, Mary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1528 Greenwich Circle

City Birmingham,	State AL	Zip Code 35226
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LHC Group	Occupation (for Individual) State Operation Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2019

Transaction ID : SA11AI.23042

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$30 Bi-Weekly)

B. Gray, Mary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1528 Greenwich Circle

City Birmingham,	State AL	Zip Code 35226
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LHC Group	Occupation (for Individual) State Operation Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2019

Transaction ID : SA11AI.23043

Amount of Each Receipt this Period
30.00

Memo Item
Payroll Deduction (\$30 Bi-Weekly)

C. Hengst, Carla, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 Earth Wood Court

City Louisville	State KY	Zip Code 40245
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LHC Group	Occupation (for Individual) Sr. VP of Community Based Services
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2019

Transaction ID : SA11AI.23020

Amount of Each Receipt this Period
25.00

Memo Item
Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Hengst, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Earth Wood Court
 City Louisville State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Sr. VP of Community Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23021
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Hollier, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 95
 City Opleousas State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Louisiana Health Care Group, I Occupation (for Individual) Legal Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23022
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Hollier, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 95
 City Opleousas State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Louisiana Health Care Group, I Occupation (for Individual) Legal Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23023
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Indest, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 Duperier Ave.
 City New Iberia State LA Zip Code 70563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) VP/COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2525.00

Date of Receipt 07 / 10 / 2019
Transaction ID : SA11AI.23066
 Amount of Each Receipt this Period 500.00
 Memo Item
 Donation

B. Indest, Zachary, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) ViP of Clinical Intergration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23024
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Indest, Zachary, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) ViP of Clinical Intergration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23025
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Kuehn, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 Persimmon Way
 City Lake Charles State LA Zip Code 70518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23058
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

B. Kuehn, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 Persimmon Way
 City Lake Charles State LA Zip Code 70518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23059
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

C. Laing, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 Dogwood Springs Lane
 City Mena State AR Zip Code 71953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Market Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23048
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Laing, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 Dogwood Springs Lane
 City Mena State AR Zip Code 71953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Market Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23049
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Lege, Jude, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13806 Elk Road
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) Directors of Nursing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23026
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Lege, Jude, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13806 Elk Road
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) Directors of Nursing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23027
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 15 OF 23
<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Little, JoAnne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Groups Occupation (for Individual) Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23050
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Little, JoAnne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Groups Occupation (for Individual) Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23051
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. MacMillian, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Deer Park Trial
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2660.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23062
 Amount of Each Receipt this Period 190.00
 Memo Item
 Payroll Deduction (\$190 Bi-Weekly)

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 16 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. MacMillian, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Deer Park Trial
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23065
 Amount of Each Receipt this Period 190.00
 Memo Item
 Payroll Deduction (\$190 Bi-Weekly)

B. Myers, Brach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Worth Ave.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Vice President of Strategic Partnershi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23052
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. Myers, Brach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Worth Ave.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Vice President of Strategic Partnershi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23053
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

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: (check only one)	PAGE 17 OF 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Myers, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Morning Mist
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5560.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23054
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Myers, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Morning Mist
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5600.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23055
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. Robinson, Rodger, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 Martinsburg Cove
 City Collierville State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area VP of Operations - Hospice
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23028
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Robinson, Rodger, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 Martinsburg Cove
 City Collierville State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area VP of Operations - Hospice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23029
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Simien, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LGC Group Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 539.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23044
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

C. Simien, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LGC Group Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 577.50

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23045
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	102.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 23
<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Simmons, Kermit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Rue Christopher Crossing
 City Natchitoches State LA Zip Code 71457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP of Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23030
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Simmons, Kermit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Rue Christopher Crossing
 City Natchitoches State LA Zip Code 71457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP of Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23031
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Stagg, Anita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 Winding Willows
 City Bossier City State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23032
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23
	<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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Stagg, Anita, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 713 Winding Willows

City Bossier City	State LA	Zip Code 71111
----------------------	-------------	-------------------

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

Name of Employer (for Individual) LHC Group	Occupation (for Individual) DVP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2019

Transaction ID : SA11AI.23033

Amount of Each Receipt this Period
25.00

Memo Item
Payroll Deduction (\$25 Bi-Weekly)

B. Taylor, Harold, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 Purple Dawn Drive

City Sunset	State LA	Zip Code 70584
----------------	-------------	-------------------

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

Name of Employer (for Individual) La. Home Care Group, Inc.	Occupation (for Individual) Director of Purchasing
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
539.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2019

Transaction ID : SA11AI.23046

Amount of Each Receipt this Period
38.50

Memo Item
Payroll Deduction (\$38.50 Bi-Weekly)

C. Taylor, Harold, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 252 Purple Dawn Drive

City Sunset	State LA	Zip Code 70584
----------------	-------------	-------------------

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

Name of Employer (for Individual) La. Home Care Group, Inc.	Occupation (for Individual) Director of Purchasing
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
577.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2019

Transaction ID : SA11AI.23047

Amount of Each Receipt this Period
38.50

Memo Item
Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	102.00
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 21 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Tobey, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 Leo Avenue
 City Shreveport State LA Zip Code 71105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Sales and Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23060
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

B. Tobey, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 Leo Avenue
 City Shreveport State LA Zip Code 71105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Sales and Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23061
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

C. Williams, Christa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1549 Camelot Dr,
 City Henderson State KY Zip Code 42420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23014
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 23
	(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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Williams, Christa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1549 Camelot Dr,
 City Henderson State KY Zip Code 42420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 21 / 2019**
Transaction ID : SA11AI.23015
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

B. Willis, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 Norcross Drive
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) VP of Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 02 / 2019**
Transaction ID : SA11AI.23034
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Willis, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 Norcross Drive
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) VP of Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **07 / 21 / 2019**
Transaction ID : SA11AI.23035
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 23
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Ziegler, Diana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Thompson Loop
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Revenue Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 02 / 2019
Transaction ID : SA11AI.23036
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Ziegler, Diana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Thompson Loop
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Revenue Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2019
Transaction ID : SA11AI.23037
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

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

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	2464.00