Image# 13940496274					PAGE 1 / 6
FEC A	EPORT OF R ND DISBURS r Other Than An Autho	EMENTS	\$	Off	fice Use Only
1. NAME OF TY COMMITTEE (in full)	(PE OR PRINT V	Example: If typing	g, type	12FE4M5	
		over the lines.			
ADDRESS (number and street)	420 W. Pinhook Road				
Check if different	Suite A				
than previously reported. (ACC)					70503
2. FEC IDENTIFICATION NUM		•	S	TATE 🔺	ZIP CODE
C C00382796	3. IS T REP	HIS X NI ORT X (N	EW I) OR	AMENI (A)	DED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	(b) Monthly Report Due On: X Mar 20		lay 20 (M5) un 20 (M6)	Aug 20 (Sep 20 ((Non-Election Year Only)
April 15	Apr 20	(M4) Ju	ul 20 (M7)	Oct 20 (M	M10) Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2)	(c) 12-Day PRE -Election	Primary (12P)		General (12G	a) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (1	2C)	Special (12S))
January 31 Year-End Report (YE)	Election c	n /	D D / Y	YYYY	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	General (30G)		Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the: Election c	n /	D D / Y	Y Y Y Y	in the State of
5. Covering Period 02	/ D D / Y Y Y Y Y 01 2013	through	M M 02	/ D D / Y 28	2013
I certify that I have examined this	Report and to the best of my	/ knowledge and be	elief it is true	, correct and co	mplete.
Type or Print Name of Treasurer	Albert Simien				
Signature of Treasurer	imien	[Electronically	Filed] Da	te 03 /	20 / Y Y Y Y 2013
NOTE: Submission of false, erroneou	us, or incomplete information m	ay subject the perso	on signing this	Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				F	FEC FORM 3X Rev. 12/2004

03/20/2013 18 : 24

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page **2**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

R	Report Covering the Period: From: 02		02 / D D / Y Y Y Y Y 28 2013
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		3939.54
	(b) Cash on Hand at Beginning of Reporting Period	7798.07	
	(c) Total Receipts (from Line 19)	1264.51	5123.04
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	9062.58	9062.58
7.	Total Disbursements (from Line 31)	0.00	0.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9062.58	9062.58
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

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DETAILED SUMMARY PAGE	DETAIL	ED S	UMMA	ARY	PAGE
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FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC М M D D Y Y M D 02 28 2013 Report Covering the Period: 02 01 2013 From: To: COLUMN A COLUMN B I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 770.00 290.00 (i) Itemized (use Schedule A)..... 974.51 4353.04 (ii) Unitemized (iii) TOTAL (add 5123.04 1264.51 Lines 11(a)(i) and (ii)..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 5123.04 1264.51 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 Party Committees..... 0.00 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 Political Committees..... 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 (c) Total Transfers (add 18(a) and 18(b)).. 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))...... 1264.51

1264.51

20. Total Federal Receipts (subtract Line 18(c) from Line 19)►

FE6AN026

Image# 13940496276

of Receipts

	7		7	5123.04
				5123.04

DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A Total This Period	COLUMN B
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar Year-to-Date
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures (c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(ii) Levin Share (b) Federal Election Activity Paid Entirely		
With Federal Funds (c) Total Federal Election Activity (add	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0.00	0.00

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1264.51	5123.04
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	1264.51	5123.04
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	0.00	0.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Image# 13940496279

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

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			Detailed Summary Page		11a 13		11b 14	11c 15	12 16	17			
	y information copied from such Reports and S for commercial purposes, other than using the												
\rangle	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GRC	UP EMPI	LOYEE FEDERAL POLI	TICA	LAC	TIC	ON C	OMMI	TTEE	INC			
Α.	Full Name (Last, First, Middle Initial) Richard MacMillian Mailing Address 324 Deer Park Trial					Date of Receipt							
	City Lafayette FEC ID number of contributing	State LA	Zip Code 70508	A				SA11AI. Receipt th		d			
	federal political committee. Name of Employer LHC Group	Occupation Legal Coun		— Pa	ayroll D	Dedu	ction (S	\$190 Bi-w		00.00			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 760.00		-								
в.	Full Name (Last, First, Middle Initial) Gary Thietten					Date of Receipt							
	Mailing Address 10611 Pine Shadow Road					02 08 2013							
	City South Jordan	State UT	Zip Code 84095	Transaction ID : SA11AI.12238 Amount of Each Receipt this Period						d			
	FEC ID number of contributing federal political committee.		100.00						0.00				
	Name of Employer LHC Group	Occupation VP of Corp.	Development	— Pa	 Payroll Deduction (\$100 Bi-weekly) 								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	1									
c.	Full Name (Last, First, Middle Initial)				Date of	Red	ceipt						
	Mailing Address City State Zip Code					M = M / D = D / Y = Y = Y = Y							
	City	Zip Code	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.												
	Name of Employer												
	Receipt For: Primary General Other (specify)	Year-to-Date ▼											
s	UBTOTAL of Receipts This Page (optional)		_				,		29	0.00			
-	OTAL This Pariod (last page this line number	oply)			-				29	0.00			

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

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