



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2013"/>	<input type="text" value="3939.54"/>	<input type="text" value="3939.54"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9108.91"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1452.27"/>	<input type="text" value="59612.14"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="10561.18"/>	<input type="text" value="63551.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9500.00"/>	<input type="text" value="62490.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1061.18"/>	<input type="text" value="1061.18"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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).....	1219.77	44969.59
(ii) Unitemized .....	232.50	12042.55
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1452.27	57012.14
(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) .....	1452.27	57012.14
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	2600.00
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))..... ▶	1452.27	59612.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1452.27	59612.14

**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.....	9500.00	62150.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	340.50
(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	340.50
29. Other Disbursements .....	0.00	0.00
30. 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
(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)) ..	9500.00	62490.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9500.00	62490.50

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	1452.27	57012.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	340.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1452.27	56671.64
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 21
	<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. Pam Bridges**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 Ormandy Drive  
 City Baton Rouge State LA Zip Code 70808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Louisiana Health Care Group, I Occupation Corporate Trainer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **780.00**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11AI.13668**  
 Amount of Each Receipt this Period **30.00**  
 Payroll Deduction (\$30 Bi-Weekly)

**B. Carolyn Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 Greenhaven Dr,  
 City Lafayette, State LA Zip Code 70508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation RN  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.12**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11AI.13688**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

**C. Linda Cloer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8117 Spanish Oak Drive,  
 City Gautier State MS Zip Code 38553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DON  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.12**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11AI.13689**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **49.24**  
**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 21
	<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. Jamie Cole**  
Full Name (Last, First, Middle Initial)

Mailing Address HC 71 box 65,

City Asbury State WV Zip Code 24916

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

Name of Employer LHC Group Occupation Office Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13702**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

**B. Candance Comeaux**  
Full Name (Last, First, Middle Initial)

Mailing Address 2209 Belle Ruelle,

City New Iberia State LA Zip Code 70563

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

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13690**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address 2206 Lacache,

City Lake Charles State LA Zip Code 70610

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

Name of Employer LHC Group Occupation OT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13691**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **29.24**

**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 8 OF 21  
(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**

Full Name (Last, First, Middle Initial)  
**A. Adrienne Davis**

Mailing Address 8 Worthington Lane,

City Parkersburg State WV Zip Code 26104

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

Name of Employer LHC Group Occupation DON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13692**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Anna DeLee**

Mailing Address 17336 Hwy 432

City Clinton State LA Zip Code 70722

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

Name of Employer LHC Group Occupation Director of Nursing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13703**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Chris Duhon**

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 LHC Group Occupation RN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13669**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **49.62**

**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 9 OF 21
	<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**

Full Name (Last, First, Middle Initial) <b>A. Ronda Dupree</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2013 <b>Transaction ID : SA11Al.13670</b>
Mailing Address 130 Hwy 132		Amount of Each Receipt this Period 30.00
City Delhi	State LA	Zip Code 71232
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Operation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Carlin Elrod</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2013 <b>Transaction ID : SA11Al.13693</b>
Mailing Address 252 Fariview Street		Amount of Each Receipt this Period 9.62
City Humboldt	State TN	Zip Code 38343
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$9.62 Bi-Weekly)	
Name of Employer LHC Group	Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.12	

Full Name (Last, First, Middle Initial) <b>C. Shayne Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2013 <b>Transaction ID : SA11Al.13671</b>
Mailing Address 390 Thicket Drive,		Amount of Each Receipt this Period 38.47
City Elizabethtown,	State KY	Zip Code 42701
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.47 Bi-Weekly)	
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.22	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	78.09
<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 10 OF 21
	<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**

Full Name (Last, First, Middle Initial) <b>A. Lessley Fontenot</b>		Date of Receipt 12 / 12 / 2013 <b>Transaction ID : SA11Al.13660</b>
Mailing Address 2303 sandalwood Drive		Amount of Each Receipt this Period 25.00
City Lafayette	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25 Bi-Weekly)	
Name of Employer LHC Group	Occupation Area Sales Manager	Aggregate Year-to-Date 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Barbara Goodman</b>		Date of Receipt 12 / 12 / 2013 <b>Transaction ID : SA11Al.13679</b>
Mailing Address 420 W. Pinhook Road		Amount of Each Receipt this Period 15.00
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15 Bi-Weekly)	
Name of Employer LHC Group	Occupation Regional Manager	Aggregate Year-to-Date 390.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>c. Mary Gray</b>		Date of Receipt 12 / 12 / 2013 <b>Transaction ID : SA11Al.13672</b>
Mailing Address 1528 Greenwick Circle		Amount of Each Receipt this Period 30.00
City Birmingham,	State AL	Zip Code 35226
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Operation Director	Aggregate Year-to-Date 780.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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: PAGE 11 OF 21  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Christopher Hardy**

Mailing Address 161 Rue Katherine,

City Opelousas	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation OT
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2013

**Transaction ID : SA11AI.13694**

Amount of Each Receipt this Period  

9.62
------

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Richard Hollier**

Mailing Address P.O. Box 95

City Opelousas	State LA	Zip Code 70571
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FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1040.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2013

**Transaction ID : SA11AI.13705**

Amount of Each Receipt this Period  

40.00
-------

Payroll Deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Pamela Hooks**

Mailing Address 369 Sir Thomas Henry

City Opelousas	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2013

**Transaction ID : SA11AI.13695**

Amount of Each Receipt this Period  

9.62
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Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>59.24</b>
<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 21
	<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. Kathleen Keirle**  
Full Name (Last, First, Middle Initial)

Mailing Address 907 Cindy Lane,  
City Westminister State MD Zip Code 21157

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

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  
**12 / 12 / 2013**  
Transaction ID : **SA11AI.13696**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Jeffrey Kreger**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Creek Bnd  
City Lafayette State LA Zip Code 70508

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

Name of Employer LHC Group Occupation Sr. VP of Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3400.00**

Date of Receipt  
**12 / 12 / 2013**  
Transaction ID : **SA11AI.13661**

Amount of Each Receipt this Period  
**200.00**

Payroll Deduction (\$200 Bi-Weekly)

**C. Melanie Kuehn**  
Full Name (Last, First, Middle Initial)

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 LHC Group Occupation DVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
**12 / 12 / 2013**  
Transaction ID : **SA11AI.13681**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>259.62</b>
<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 13 OF 21
	<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. Amy Laing**  
 Full Name (Last, First, Middle Initial)  
 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 LHC Group Occupation State Market Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **820.00**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11Al.13706**  
 Amount of Each Receipt this Period **40.00**  
 Payroll Deduction (\$40 Bi-Weekly)

**B. Spencer Marks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5467 Highway 182  
 City Opelousas State LA Zip Code 70570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Telecom Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11Al.13707**  
 Amount of Each Receipt this Period **10.00**  
 Payroll Deduction (\$10 Bi-Weekly)

**C. Paul Mcdonald**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6120 Lindholm Dr,  
 City Mobile State AL Zip Code 36693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation PTA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11Al.13708**  
 Amount of Each Receipt this Period **10.00**  
 Payroll Deduction (\$10 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**  
**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 21
	<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**

Full Name (Last, First, Middle Initial)  
**A. Brach Myers**

Mailing Address 201 Worth Ave.

City Lafayette	State LA	Zip Code 70508
-------------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation Vice President of Strategic Partnershi
-------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13709**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Keith Myers**

Mailing Address 211 Morning Mist

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

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

Name of Employer The LHC Group	Occupation President/CEO
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6040.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13710**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Cathy Newhouse**

Mailing Address 97 Stonehill Road

City Lafayette	State LA	Zip Code 70508
-------------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation Sr. VP of Clinical Program Development
-------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13684**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<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 21
	<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. Ted Pappas**  
Full Name (Last, First, Middle Initial)

Mailing Address 440 Hwy 758

City Eunice	State LA	Zip Code 70535
----------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation PT
-------------------------------	------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13697**

Amount of Each Receipt this Period  
**19.24**

Payroll Deduction (\$19.24 Bi-Weekly)

**B. Linda Parlow**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo	State TN	Zip Code 38001
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
-------------------------------	------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.86**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13698**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**C. Katie Reiman**  
Full Name (Last, First, Middle Initial)

Mailing Address 815 Pecan Drive,

City St Gabriel	State LA	Zip Code 70776
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Speech Pathology
-------------------------------	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.88**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13699**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>38.48</b>
<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 16 OF 21  
(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. William Sanford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5502 Coteau Road  
 City State Zip Code  
 New Iberia LA 70560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LHC Group CIO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13712**  
 Amount of Each Receipt this Period  
 10.00  
 Payroll Deduction (\$10 Bi-Weekly)

**B. Albert Simien**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 Shadowbrook Lane  
 City State Zip Code  
 Youngsville LA 70592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LGC Group Director of Purchasing  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13674**  
 Amount of Each Receipt this Period  
 38.50  
 Payroll Deduction (\$38.50 Bi-Weekly)

**C. Cindy Sobel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2037 Country Wood Court  
 City State Zip Code  
 Walnut Creek CA 94598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LHC Group Director of Nurses  
 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  
 12 / 12 / 2013  
**Transaction ID : SA11Al.13686**  
 Amount of Each Receipt this Period  
 50.00  
 Payroll Deduction (\$50 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 98.50  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 17 OF 21  
(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**

Full Name (Last, First, Middle Initial)  
**A. Ann Spade**  
 Mailing Address 3994 Lost Pavement Road  
 City Parkersburg State WV Zip Code 26101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13713**  
 Amount of Each Receipt this Period 10.00  
 Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Anita Stagg**  
 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 LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13714**  
 Amount of Each Receipt this Period 10.00  
 Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Lori Stagg**  
 Mailing Address 204 Founders St.  
 City Lafayette State LA Zip Code 70508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP - Hospice Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13675**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 18 OF 21  
(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**

Full Name (Last, First, Middle Initial)  
**A. Tami Stout**

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

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

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13665**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Harold Taylor**

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 La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1001.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13676**

Amount of Each Receipt this Period  
**38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Gary Thietten**

Mailing Address 10611 Pine Shadow Road

City South Jordan, State UT Zip Code 84095

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

Name of Employer LHC Group Occupation VP of Corp. Development

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13715**

Amount of Each Receipt this Period  
**100.00**

Payroll Deduction (\$100 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **158.50**

**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 21
	<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. James Tobey**  
Full Name (Last, First, Middle Initial)

Mailing Address 465 Leo Avenue

City Shreveport State LA Zip Code 71105

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

Name of Employer LHC Group Occupation Director of Sales and Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13687**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50 Bi-Weekly)

**B. Jackie Weeks**  
Full Name (Last, First, Middle Initial)

Mailing Address 4507 Briarwood Terrace,

City Marshall State TX Zip Code 75672

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

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.12**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13700**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**C. Christa Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 1549 Camelot Dr,

City Henderson State KY Zip Code 42420

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

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **322.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013  
**Transaction ID : SA11AI.13667**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>79.62</b>
<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 20 OF 21  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Cheryl Wyatt**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 279  
City Del Rio State TN Zip Code 37727  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LHC Group Occupation RN BM  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.12**

Date of Receipt **12 / 12 / 2013**  
**Transaction ID : SA11AL13701**  
Amount of Each Receipt this Period **9.62**  
Payroll Deduction (\$9.62 Bi-Weekly)

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

Date of Receipt  
Amount of Each Receipt this Period

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

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>9.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1219.77</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BOEHNER FOR SPEAKER**

Mailing Address 320 FIRST ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Donation

011

Candidate Name

**JOHN A. BOEHNER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : SB23.13720**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. CHARLES BOUSTANY JR. FOR CONGRESS**

Mailing Address 2936 Johnston St.

City Lafayette State LA Zip Code 70503

Purpose of Disbursement  
Donation

011

Candidate Name

**CHARLES DR. JR. BOUSTANY Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : SB23.13717**

Amount of Each Disbursement this Period

1700.00
---------

Full Name (Last, First, Middle Initial)

**C. NEW PIONEERS PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Donation

011

Candidate Name

**GREGORY P MR. WALDEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : SB23.13718**

Amount of Each Disbursement this Period

2800.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

9500.00
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**TOTAL** This Period (last page this line number only)..... ▶

9500.00
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