

**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="2016"/>	<input type="text" value="12700.92"/>	<input type="text" value="12700.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7485.11"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3320.64"/>	<input type="text" value="21616.86"/>
(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="10805.75"/>	<input type="text" value="34317.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2024.00"/>	<input type="text" value="25536.03"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8781.75"/>	<input type="text" value="8781.75"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

Page 3

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).....	1477.48	12019.18
(ii) Unitemized	843.16	8597.68
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2320.64	20616.86
(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)	2320.64	20616.86
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.....	1000.00	1000.00
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))..... ▶	3320.64	21616.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3320.64	21616.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	2000.00	25500.00
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	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	24.00	36.03
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)) ..	2024.00	25536.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2024.00	25536.03

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)	2320.64	20616.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2320.64	20616.86
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 14
	<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

Full Name (Last, First, Middle Initial)
A. 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 ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11AI.18335

Amount of Each Receipt this Period
60.00

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

Full Name (Last, First, Middle Initial)
B. Ronda Dupree

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
---------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation State Operation Director
-------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11AI.18336

Amount of Each Receipt this Period
60.00

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

Full Name (Last, First, Middle Initial)
C. Lessley Fontenot

Mailing Address 2303 sandalwood Drive

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

Name of Employer LHC Group	Occupation Area Sales Manager
-------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016
Transaction ID : SA11AI.18332

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 14
(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. Jules Galiouras

Mailing Address 804 Woodmont Dr.

City State Zip Code
 Convington LA 70433

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

Name of Employer Occupation
 LHC Group DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11AI.18328

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Mary Gray

Mailing Address 1528 Greenwich Circle

City State Zip Code
 Birmingham, AL 35226

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

Name of Employer Occupation
 LHC Group State Operation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11AI.18337

Amount of Each Receipt this Period
 60.00

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

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

Mailing Address P.O. Box 95

City State Zip Code
 Opleousas LA 70571

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 640.00

Date of Receipt
 08 / 11 / 2016
Transaction ID : SA11AI.18340

Amount of Each Receipt this Period
 80.00

Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<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

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

Mailing Address 4205 Persimmon Way

City State Zip Code
Lake Charles LA 70518

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

Name of Employer Occupation
LHC Group DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11AI.18345

Amount of Each Receipt this Period
100.00

Memo Item
Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Amy Laing

Mailing Address 238 Dogwood Springs Lane

City State Zip Code
Mena AR 71953

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

Name of Employer Occupation
LHC Group State Market Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11AI.18341

Amount of Each Receipt this Period
80.00

Memo Item
Payroll Deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Errol Leblanc

Mailing Address 5908 John Boudreaux Road,

City State Zip Code
Abbeville LA 70510

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

Name of Employer Occupation
LHC Group PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 11 / 2016
Transaction ID : SA11AI.18329

Amount of Each Receipt this Period
40.00

Memo Item
Payroll Deduction (\$20 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
	<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. Richard MacMillian
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 Deer Park Trail
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Legal Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3040.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11AI.18347
 Amount of Each Receipt this Period 380.00
 Memo Item
 Payroll Deduction (\$190 Bi-Weekly)

B. Brach Myers
 Full Name (Last, First, Middle Initial)
 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 ▼ 640.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11AI.18343
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. Keith Myers
 Full Name (Last, First, Middle Initial)
 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 ▼ 640.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11AI.18344
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	540.00
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 14
	<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

Full Name (Last, First, Middle Initial) A. Ted Pappas		Date of Receipt MM / DD / YYYY 08 / 11 / 2016 Transaction ID : SA11AI.18327
Mailing Address 440 Hwy 758		Amount of Each Receipt this Period 38.48
City Eunice	State LA	Zip Code 70535
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer LHC Group	Occupation PT	Payroll Deduction (\$19.24 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.84	

Full Name (Last, First, Middle Initial) B. Melisa Rittenberry		Date of Receipt MM / DD / YYYY 08 / 11 / 2016 Transaction ID : SA11AI.18285
Mailing Address 3341 Quail Run Ct		Amount of Each Receipt this Period 5.00
City Nashville	State TN	Zip Code 37214
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer LHC Group	Occupation Regional Operations Directory	Payroll Deduction (\$2.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.50	

Full Name (Last, First, Middle Initial) C. Albert Simien		Date of Receipt MM / DD / YYYY 08 / 11 / 2016 Transaction ID : SA11AI.18338
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 77.00
City Youngsville	State LA	Zip Code 70592
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer LGC Group	Occupation Director of Purchasing	Payroll Deduction (\$38.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.48
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 14
<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. Tami Stout
Full Name (Last, First, Middle Initial)
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 **245.00**

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11AI.18304
Amount of Each Receipt this Period **10.00**
 Memo Item
Payroll Deduction (\$5 Bi-Weekly)

B. Harold Taylor
Full Name (Last, First, Middle Initial)
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 **616.00**

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11AI.18339
Amount of Each Receipt this Period **77.00**
 Memo Item
Payroll Deduction (\$38.50 Bi-Weekly)

C. 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 **800.00**

Date of Receipt **08 / 11 / 2016**
Transaction ID : SA11AI.18346
Amount of Each Receipt this Period **100.00**
 Memo Item
Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	187.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 14
(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. Cynthia Wells

Mailing Address 367 Adams Circle

City State Zip Code
 Crawfordsville AR 72327

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

Name of Employer Occupation
 LHC Groups Hospice Regional Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11AI.18326

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 1549 Camelot Dr,

City State Zip Code
 Henderson KY 42420

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

Name of Employer Occupation
 LHC Group RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11AI.18330

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction (\$20 Bi-Weekly)

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

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	1477.48

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

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

FOR LINE NUMBER: PAGE 13 OF 14
(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. Full Name (Last, First, Middle Initial)
WYDEN FOR SENATE

Mailing Address **PO BOX 3498**

City **PORTLAND** State **OR** Zip Code **97208**

FEC ID number of contributing federal political committee. **C C00308676**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 08 / 2016

Transaction ID : SA16.18353

Amount of Each Receipt this Period
1000.00

Memo Item
 Refund Contribution

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

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SCOTT ANGELLE, LLC

Mailing Address P.O. BOX 1385

City State Zip Code
BREAUX BRIDGE LA 70517

Purpose of Disbursement
Doantion

Category/
Type

Candidate Name
SCOTT MR. ANGELLE

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: LA District: 03

Date of Disbursement

/ /

Transaction ID : SB23.18359

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PETE SESSIONS FOR CONGRESS

Mailing Address PO BOX 823047

City State Zip Code
DALLAS TX 75382

Purpose of Disbursement
Donation

Category/
Type

Candidate Name
PETE MR. SESSIONS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: TX District: 32

Date of Disbursement

/ /

Transaction ID : SB23.18356

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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