

**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="10415.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12523.78"/>	<input type="text" value="28949.91"/>
(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="22939.45"/>	<input type="text" value="32889.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19100.00"/>	<input type="text" value="29050.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3839.45"/>	<input type="text" value="3839.45"/>
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

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).....	11999.42	18706.48
(ii) Unitemized	524.36	7743.43
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12523.78	26449.91
(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)	12523.78	26449.91
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	2500.00
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))..... ▶	12523.78	28949.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12523.78	28949.91

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.....	19100.00	29050.00
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	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)) ..	19100.00	29050.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19100.00	29050.00

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)	12523.78	26449.91
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12523.78	26449.91
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:	PAGE 6 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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. Mary Beaulieu
Full Name (Last, First, Middle Initial)
Mailing Address 134 Plantation Drive

City New Iberia	State LA	Zip Code 70563
--------------------	-------------	-------------------

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

Name of Employer Louisiana Health Care Group, I	Occupation Director of Nursing
--	-----------------------------------

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
06	/	06	/	2013

Transaction ID : SA11AI.12674

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

B. Mary Beaulieu
Full Name (Last, First, Middle Initial)
Mailing Address 134 Plantation Drive

City New Iberia	State LA	Zip Code 70563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	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
06	/	21	/	2013

Transaction ID : SA11AI.12675

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

c. Angie Begnaud
Full Name (Last, First, Middle Initial)
Mailing Address 645 Bellevue Plantation Road

City Lafayette	State LA	Zip Code 70503
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SA11AI.12678

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 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:	PAGE 7 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Angie Begnaud

Mailing Address 645 Bellevue Plantation Road

City Lafayette	State LA	Zip Code 70503
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation DVP-Operations
-------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : SA11AI.12679

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Pam Bridges

Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
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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 ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SA11AI.12689

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

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

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 ▼ **390.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : SA11AI.12690

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 24
	<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. Kevin Crager
Full Name (Last, First, Middle Initial)

Mailing Address 110 Bafanridge

City Hot Springs State AR Zip Code 71901

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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12680

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

B. Kevin Crager
Full Name (Last, First, Middle Initial)

Mailing Address 110 Bafanridge

City Hot Springs State AR Zip Code 71901

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 ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : SA11AI.12681

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

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

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 ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12691

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.00**

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 24
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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. Chris Duhon

Mailing Address 10429 Rue de Duhon

City Abbeville	State LA	Zip Code 70510
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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 ▼ **390.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : SA11AI.12692

Amount of Each Receipt this Period
30.00

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

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

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SA11AI.12693

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

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

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
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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 ▼ **390.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : SA11AI.12694

Amount of Each Receipt this Period
30.00

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 10 OF 24
	<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)
A. Shayne Ferguson

Mailing Address 390 Thicket Drive,

City Elizabethtown, State KY Zip Code 42701

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 ▼ **461.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12762

Amount of Each Receipt this Period
38.47

Payroll Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Shayne Ferguson

Mailing Address 390 Thicket Drive,

City Elizabethtown, State KY Zip Code 42701

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 ▼ **500.11**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : SA11AI.12763

Amount of Each Receipt this Period
38.47

Payroll Deduction (\$38.47 Bi-Weekly)

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

Mailing Address 2303 sandalwood Drive

City Lafayette, State LA Zip Code 70570

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 ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12764

Amount of Each Receipt this Period
25.00

Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **101.94**

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 11 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

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 ▼ **275.00**

Date of Receipt **06 / 21 / 2013**

Transaction ID : SA11Al.12765

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

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

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

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 ▼ **360.00**

Date of Receipt **06 / 06 / 2013**

Transaction ID : SA11Al.12695

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

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

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

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 ▼ **390.00**

Date of Receipt **06 / 21 / 2013**

Transaction ID : SA11Al.12696

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 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 12 OF 24
<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 Hollier
Full Name (Last, First, Middle Initial)

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 Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12768

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40 Bi-Weekly)

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

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 Louisiana Health Care Group, I Occupation Legal Compliance

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
06 / 21 / 2013

Transaction ID : SA11AI.12769

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40 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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12682

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. 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 **650.00**

Date of Receipt **06 / 21 / 2013**
Transaction ID : SA11AI.12683
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction (\$50 Bi-Weekly)

B. 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 **360.00**

Date of Receipt **06 / 06 / 2013**
Transaction ID : SA11AI.12697
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30 Bi-Weekly)

C. 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 **390.00**

Date of Receipt **06 / 21 / 2013**
Transaction ID : SA11AI.12698
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	110.00
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 24
	<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. Richard MacMillian
 Full Name (Last, First, Middle Initial)
 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 LHC Group Occupation Legal Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2280.00**

Date of Receipt **06 / 06 / 2013**
Transaction ID : SA11AI.12772
 Amount of Each Receipt this Period **190.00**
 Payroll Deduction (\$190 Bi-Weekly)

B. Richard MacMillian
 Full Name (Last, First, Middle Initial)
 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 LHC Group Occupation Legal Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2470.00**

Date of Receipt **06 / 21 / 2013**
Transaction ID : SA11AI.12773
 Amount of Each Receipt this Period **190.00**
 Payroll Deduction (\$190 Bi-Weekly)

C. Ginger 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 Board Member
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **06 / 27 / 2013**
Transaction ID : SA11AI.12799
 Amount of Each Receipt this Period **5000.00**
 Contribution

SUBTOTAL of Receipts This Page (optional)..... **5380.00**
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 24
	<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. Keith Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : SA11AI.12770
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction (\$40 Bi-Weekly)

B. Keith Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 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
 06 / 21 / 2013
Transaction ID : SA11AI.12771
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction (\$40 Bi-Weekly)

C. Keith Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2013
Transaction ID : SA11AI.12800
 Amount of Each Receipt this Period
 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5080.00
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 24
(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. Ted Pappas

Mailing Address 440 Hwy 758

City State Zip Code
Eunice LA 70535

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 ▼
230.88

Date of Receipt
MM / DD / YYYY
06 / 06 / 2013
Transaction ID : SA11AI.12774

Amount of Each Receipt this Period
19.24

Payroll Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Ted Pappas

Mailing Address 440 Hwy 758

City State Zip Code
Eunice LA 70535

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 ▼
250.12

Date of Receipt
MM / DD / YYYY
06 / 21 / 2013
Transaction ID : SA11AI.12775

Amount of Each Receipt this Period
19.24

Payroll Deduction (\$19.24 Bi-Weekly)

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

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 ▼
462.00

Date of Receipt
MM / DD / YYYY
06 / 06 / 2013
Transaction ID : SA11AI.12776

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.98

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 24
(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. Albert Simien

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 ▼
500.50

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2013
Transaction ID : SA11AI.12777

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Anita Stagg

Mailing Address 713 Winding Willows

City State Zip Code
Bossier City LA 71111

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 ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2013
Transaction ID : SA11AI.12684

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

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

Mailing Address 713 Winding Willows

City State Zip Code
Bossier City LA 71111

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 ▼
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2013
Transaction ID : SA11AI.12685

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **138.50**

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 18 OF 24
(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. Lori Stagg
Full Name (Last, First, Middle Initial)
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 **360.00**

Date of Receipt **06 / 06 / 2013**
Transaction ID : SA11AI.12699
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30 Bi-Weekly)

B. Lori Stagg
Full Name (Last, First, Middle Initial)
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 **390.00**

Date of Receipt **06 / 21 / 2013**
Transaction ID : SA11AI.12700
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30 Bi-Weekly)

C. 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 **240.00**

Date of Receipt **06 / 06 / 2013**
Transaction ID : SA11AI.12676
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20 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:	PAGE 19 OF 24
	(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

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : SA11AI.12677

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 ▼ **462.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : SA11AI.12778

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. 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 ▼ **500.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : SA11AI.12779

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **97.00**

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 20 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 10611 Pine Shadow Road

City	State	Zip Code
South Jordan	UT	84095

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

Name of Employer	Occupation
LHC Group	VP of Corp. Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SA11AI.12780

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100 Bi-Weekly)

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

Mailing Address 10611 Pine Shadow Road

City	State	Zip Code
South Jordan	UT	84095

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

Name of Employer	Occupation
LHC Group	VP of Corp. Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : SA11AI.12781

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100 Bi-Weekly)

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

Mailing Address 465 Leo Avenue

City	State	Zip Code
Shreveport	LA	71105

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

Name of Employer	Occupation
LHC Group	Director of Sales and Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : SA11AI.12686

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 21 OF 24
(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. 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 ▼ 650.00

Date of Receipt 06 / 21 / 2013
Transaction ID : SA11AI.12687
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50 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

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	11999.42

**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. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement
Donation

011

Candidate Name
BENJAMIN L CARDIN

Category/
Type

Office Sought: House
 Senate
 President
State: MD District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : **SB23.12798**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. COMMON GROUND PAC

Mailing Address 20 WEST MAPLE STREET

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
Donation

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : **SB23.12796**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. FRIENDS FOR HARRY REID

Mailing Address P.O. BOX 19163

City LAS VEGAS State NV Zip Code 89132

Purpose of Disbursement
Donation

011

Candidate Name
HARRY REID

Category/
Type

Office Sought: House
 Senate
 President
State: NV District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : **SB23.12794**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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. MCCONNELL SENATE COMMITTEE '14

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement
Voided Contribution

011

Candidate Name

MITCH MCCONNELL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : SB23.12801

Amount of Each Disbursement this Period

-	2	5	0	0	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. MCKINLEY FOR CONGRESS

Mailing Address 32 20TH STREET

City WHEELING State WV Zip Code 26003

Purpose of Disbursement
Donation

011

Candidate Name

DAVID B MCKINLEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : SB23.12795

Amount of Each Disbursement this Period

1	1	0	0	0	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. STABENOW WYDEN VICTORY FUND

Mailing Address 600 PENNSYLVANIA AVE SE SUITE 210

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Donation

011

Candidate Name

DEBBIE STABENOW

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : SB23.12791

Amount of Each Disbursement this Period

5	0	0	0	0	0	0
---	---	---	---	---	---	---

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

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

3	6	0	0	0	0	0
---	---	---	---	---	---	---

3	6	0	0	0	0	0
---	---	---	---	---	---	---

**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. STABENOW WYDEN VICTORY FUND

Mailing Address 600 PENNSYLVANIA AVE SE SUITE 210

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Donation

Category/
Type

Candidate Name
RONALD LEE WYDEN

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: OR District: 00

Date of Disbursement

/ /

Transaction ID : SB23.12793

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

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

C.

Full Name (Last, First, Middle Initial)

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

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

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