

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

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

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Albert Simien

Signature of Treasurer Albert Simien [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**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="2014"/>	<input type="text" value=""/>	<input type="text" value="1061.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17208.36"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3915.04"/>	<input type="text" value="41362.22"/>
(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="21123.40"/>	<input type="text" value="42423.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="21300.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21123.40"/>	<input type="text" value="21123.40"/>
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).....	3685.04	29248.45
(ii) Unitemized	230.00	12113.77
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3915.04	41362.22
(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)	3915.04	41362.22
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3915.04	41362.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3915.04	41362.22

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	21300.00
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)) ..	0.00	21300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	21300.00

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)	3915.04	41362.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3915.04	41362.22
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 49
	<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	

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. Pam Bridges		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11Al.15815
Mailing Address 1625 Ormandy Drive		Amount of Each Receipt this Period 30.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Payroll Deduction (\$30 Bi-Weekly)		

Full Name (Last, First, Middle Initial) B. Pam Bridges		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11Al.15816
Mailing Address 1625 Ormandy Drive		Amount of Each Receipt this Period 30.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	
Payroll Deduction (\$30 Bi-Weekly)		

Full Name (Last, First, Middle Initial) C. Pam Bridges		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11Al.15817
Mailing Address 1625 Ormandy Drive		Amount of Each Receipt this Period 30.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	
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 7 OF 49
	<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. 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 ▼ **240.50**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11AI.15726

Amount of Each Receipt this Period **9.62**
Payroll Deduction (\$9.62 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 / 2014**
Transaction ID : SA11AI.15727

Amount of Each Receipt this Period **9.62**
Payroll Deduction (\$9.62 Bi-Weekly)

C. 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 ▼ **259.74**

Date of Receipt **12 / 31 / 2014**
Transaction ID : SA11AI.15728

Amount of Each Receipt this Period **9.62**
Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 49
	(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. Jamie Cole		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : SA11AI.15762
Mailing Address HC 71 box 65,		Amount of Each Receipt this Period 10.00
City Asbury	State WV	Zip Code 24916
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation Office Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jamie Cole		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : SA11AI.15763
Mailing Address HC 71 box 65,		Amount of Each Receipt this Period 10.00
City Asbury	State WV	Zip Code 24916
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation Office Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Jamie Cole		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : SA11AI.15764
Mailing Address HC 71 box 65,		Amount of Each Receipt this Period 10.00
City Asbury	State WV	Zip Code 24916
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation Office Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 49
	<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. 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 ▼ **240.50**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11AI.15729

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 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 **12 / 12 / 2014**
Transaction ID : SA11AI.15730

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

C. 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 ▼ **259.74**

Date of Receipt **12 / 31 / 2014**
Transaction ID : SA11AI.15731

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **28.86**

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 49
	<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. Eric Cruickshank
Full Name (Last, First, Middle Initial)

Mailing Address 2206 Lacache,

City Lake Charles	State LA	Zip Code 70610
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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 ▼
240.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SA11AI.15732

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

B. 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	/	2014

Transaction ID : SA11AI.15733

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 ▼
259.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SA11AI.15734

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 49
	<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. Adrienne Davis
Full Name (Last, First, Middle Initial)

Mailing Address 8 Worthington Lane,

City Parkersburg	State WV	Zip Code 26104
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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 ▼ **240.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SA11AI.15735

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

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	/	2014

Transaction ID : SA11AI.15736

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address 8 Worthington Lane,

City Parkersburg	State WV	Zip Code 26104
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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 ▼ **259.74**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SA11AI.15737

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 49
	<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. Anna DeLee
Full Name (Last, First, Middle Initial)

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 ▼ **250.00**

Date of Receipt **12 / 01 / 2014**

Transaction ID : SA11Al.15765

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

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

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 **12 / 12 / 2014**

Transaction ID : SA11Al.15766

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

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

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 ▼ **270.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : SA11Al.15767

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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 49
	<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. 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 ▼ **750.00**

Date of Receipt **12 / 01 / 2014**

Transaction ID : SA11AI.15818

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

B. 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 ▼ **780.00**

Date of Receipt **12 / 12 / 2014**

Transaction ID : SA11AI.15819

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 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 ▼ **810.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : SA11AI.15820

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 14 OF 49
	<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. Ronda Dupree
Full Name (Last, First, Middle Initial)
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 ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15821

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

B. Ronda Dupree
Full Name (Last, First, Middle Initial)
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 ▼ **780.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.15822

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

C. Ronda Dupree
Full Name (Last, First, Middle Initial)
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 ▼ **810.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15823

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 15 OF 49
	<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. Carlin Elrod
Full Name (Last, First, Middle Initial)

Mailing Address 252 Farview STREET

City Humboldt State TN Zip Code 38343

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

Name of Employer LHC Group Occupation Physical Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : SA11AI.15738

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

B. Carlin Elrod
Full Name (Last, First, Middle Initial)

Mailing Address 252 Farview STREET

City Humboldt State TN Zip Code 38343

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

Name of Employer LHC Group Occupation Physical Therapist

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 / 2014

Transaction ID : SA11AI.15739

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address 252 Farview STREET

City Humboldt State TN Zip Code 38343

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

Name of Employer LHC Group Occupation Physical Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **259.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : SA11AI.15740

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **28.86**

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 16 OF 49
	<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. Gloria Eschete
Full Name (Last, First, Middle Initial)

Mailing Address 341 Sugar Plum St.

City Houma, State LA Zip Code 70364

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 ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : SA11AI.15768

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10 Bi-Weekly)

B. Gloria Eschete
Full Name (Last, First, Middle Initial)

Mailing Address 341 Sugar Plum St.

City Houma, State LA Zip Code 70364

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : SA11AI.15769

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 341 Sugar Plum St.

City Houma, State LA Zip Code 70364

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 ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : SA11AI.15770

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **30.00**

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 17 OF 49
(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. Lessley Fontenot
 Mailing Address 2303 sandalwood Drive
 City State Zip Code
 Lafayette LA 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group Area Sales Manager
 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
 12 / 01 / 2014
Transaction ID : SA11AI.15812
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction (\$25 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Lessley Fontenot
 Mailing Address 2303 sandalwood Drive
 City State Zip Code
 Lafayette LA 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group Area Sales Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.15813
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction (\$25 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Lessley Fontenot
 Mailing Address 2303 sandalwood Drive
 City State Zip Code
 Lafayette LA 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group Area Sales Manager
 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
 12 / 31 / 2014
Transaction ID : SA11AI.15814
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction (\$25 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 49
	<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. Jules Galiouras		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15791
Mailing Address 804 Woodmont Dr.		Amount of Each Receipt this Period 20.00
City Convington	State LA	Zip Code 70433
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Jules Galiouras		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11AI.15792
Mailing Address 804 Woodmont Dr.		Amount of Each Receipt this Period 20.00
City Convington	State LA	Zip Code 70433
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Jules Galiouras		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11AI.15793
Mailing Address 804 Woodmont Dr.		Amount of Each Receipt this Period 20.00
City Convington	State LA	Zip Code 70433
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

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 19 OF 49
	<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. Barbara Goodman
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 W. Pinhook Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15784
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15 Bi-Weekly)

B. Barbara Goodman
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 W. Pinhook Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Manager
 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
 12 / 12 / 2014
Transaction ID : SA11AI.15785
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15 Bi-Weekly)

C. Barbara Goodman
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 W. Pinhook Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15786
 Amount of Each Receipt this Period 15.00
 Payroll Deduction (\$15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 49
	<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. 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 ▼ **750.00**

Date of Receipt **12 / 01 / 2014**

Transaction ID : SA11Al.15824

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 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 ▼ **780.00**

Date of Receipt **12 / 12 / 2014**

Transaction ID : SA11Al.15825

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 ▼ **810.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : SA11Al.15826

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 21 OF 49
	<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. Christopher Hardy			Date of Receipt
Mailing Address 161 Rue Katherine,			<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.15741
Opelousas	LA	70570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation	Payroll Deduction (\$9.62 Bi-Weekly)	
LHC Group	OT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Christopher Hardy			Date of Receipt
Mailing Address 161 Rue Katherine,			<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.15742
Opelousas	LA	70570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation	Payroll Deduction (\$9.62 Bi-Weekly)	
LHC Group	OT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.12"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Christopher Hardy			Date of Receipt
Mailing Address 161 Rue Katherine,			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.15743
Opelousas	LA	70570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation	Payroll Deduction (\$9.62 Bi-Weekly)	
LHC Group	OT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="259.74"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="28.86"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 22 OF 49
	<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 ▼ **1000.00**

Date of Receipt **12 / 01 / 2014**

Transaction ID : SA11AI.15836

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 ▼ **1040.00**

Date of Receipt **12 / 12 / 2014**

Transaction ID : SA11AI.15837

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

C. 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 ▼ **1080.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : SA11AI.15838

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 49
(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. Pamela Hooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 369 Sir Thomas Henry
 City Opelousas State LA Zip Code 70570
 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 ▼ 240.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15745
 Amount of Each Receipt this Period 9.62
 Payroll Deduction (\$9.62 Bi-Weekly)

B. Pamela Hooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 369 Sir Thomas Henry
 City Opelousas State LA Zip Code 70570
 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 Y
 12 / 12 / 2014
Transaction ID : SA11AI.15746
 Amount of Each Receipt this Period 9.62
 Payroll Deduction (\$9.62 Bi-Weekly)

C. Pamela Hooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 369 Sir Thomas Henry
 City Opelousas State LA Zip Code 70570
 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 ▼ 259.74

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15747
 Amount of Each Receipt this Period 9.62
 Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 28.86
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 24 OF 49
	<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	

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. 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 ▼ **240.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15748

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

B. 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.15749

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

C. 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 ▼ **259.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15750

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 25 OF 49
	<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. Jeffrey Kreger		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15860
Mailing Address 100 Creek Bnd		Amount of Each Receipt this Period 200.00
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	Payroll Deduction (\$200 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Melanie Kuehn		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15848
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00
City Lake Charles	State LA	Zip Code 70518
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation DVP	Payroll Deduction (\$50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Melanie Kuehn		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11AI.15849
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00
City Lake Charles	State LA	Zip Code 70518
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation DVP	Payroll Deduction (\$50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 26 OF 49
	<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. 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 **1350.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : SA11AI.15850
 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 **1000.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11AI.15839
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40 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 **1040.00**

Date of Receipt **12 / 12 / 2014**
Transaction ID : SA11AI.15840
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40 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 27 OF 49
	<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. 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 ▼ **1080.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15841

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40 Bi-Weekly)

B. Ryan Latiolais
Full Name (Last, First, Middle Initial)

Mailing Address 1215 Gendarme Rd

City Carencro State LA Zip Code 70520

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

Name of Employer LHC Group Occupation Director of Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15794

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

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

Mailing Address 1215 Gendarme Rd

City Carencro State LA Zip Code 70520

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

Name of Employer LHC Group Occupation Director of Technology

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 / 2014
Transaction ID : SA11AI.15795

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: (check only one)	PAGE 28 OF 49
	<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. Ryan Latiolais		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11AI.15796
Mailing Address 1215 Gendarme Rd		Amount of Each Receipt this Period 20.00
City Carencro	State LA	Zip Code 70520
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Group	Occupation Director of Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. Errol Leblanc		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15797
Mailing Address 5908 John Boudreaux Road,		Amount of Each Receipt this Period 20.00
City Abbeville	State LA	Zip Code 70510
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Errol Leblanc		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11AI.15798
Mailing Address 5908 John Boudreaux Road,		Amount of Each Receipt this Period 20.00
City Abbeville	State LA	Zip Code 70510
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 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 ▼ 520.00	

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 29 OF 49
	<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. Errol Leblanc
Full Name (Last, First, Middle Initial)

Mailing Address 5908 John Boudreaux Road,
City Abbeville State LA Zip Code 70510

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 ▼ **540.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : SA11Al.15799

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 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 ▼ **4560.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11Al.15857

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 Bi-Weekly)

C. 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 ▼ **4750.00**

Date of Receipt **12 / 12 / 2014**
Transaction ID : SA11Al.15858

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

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 30 OF 49
	<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. Richard MacMillian		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11Al.15859
Mailing Address 324 Deer Park Trial		Amount of Each Receipt this Period 190.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$190 Bi-Weekly)	
Name of Employer LHC Group	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4940.00	

Full Name (Last, First, Middle Initial) B. Spencer Marks		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11Al.15771
Mailing Address 5467 Highway 182		Amount of Each Receipt this Period 10.00
City Opelousas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation Telecom Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Spencer Marks		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11Al.15772
Mailing Address 5467 Highway 182		Amount of Each Receipt this Period 10.00
City Opelousas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation Telecom Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 31 OF 49
(check only one)		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. 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 ▼ 270.00

Date of Receipt 12 / 31 / 2014
Transaction ID : SA11AI.15773
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10 Bi-Weekly)

B. Rebecca McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 Short Side Drive
 City Williamstown State WV Zip Code 26187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operations Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 01 / 2014
Transaction ID : SA11AI.15827
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30 Bi-Weekly)

C. Rebecca McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 Short Side Drive
 City Williamstown State WV Zip Code 26187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operations Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 12 / 2014
Transaction ID : SA11AI.15828
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 49
	<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. Rebecca McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 Short Side Drive
 City Williamstown State WV Zip Code 26187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operations Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **810.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : SA11AI.15829
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30 Bi-Weekly)

B. 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 ▼ **250.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11AI.15775
 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 / 2014**
Transaction ID : SA11AI.15776
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction (\$10 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: (check only one)	PAGE 34 OF 49
	<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. 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 ▼ 1080.00

Date of Receipt 12 / 31 / 2014
Transaction ID : SA11AI.15844

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 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 ▼ 1000.00

Date of Receipt 12 / 01 / 2014
Transaction ID : SA11AI.15845

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 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 ▼ 1040.00

Date of Receipt 12 / 12 / 2014
Transaction ID : SA11AI.15846

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 49
	<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. Keith Myers			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : SA11AI.15847
Mailing Address 211 Morning Mist			Amount of Each Receipt this Period 40.00 Payroll Deduction (\$40 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00		

Full Name (Last, First, Middle Initial) B. Ted Pappas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : SA11AI.15787
Mailing Address 440 Hwy 758			Amount of Each Receipt this Period 19.24 Payroll Deduction (\$19.24 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00		

Full Name (Last, First, Middle Initial) C. Ted Pappas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : SA11AI.15788
Mailing Address 440 Hwy 758			Amount of Each Receipt this Period 19.24 Payroll Deduction (\$19.24 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.24		

SUBTOTAL of Receipts This Page (optional).....▶	78.48
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 36 OF 49
	<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. 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 ▼ **519.48**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : SA11AI.15789

Amount of Each Receipt this Period
 19.24

Payroll Deduction (\$19.24 Bi-Weekly)

B. 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 ▼ **538.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : SA11AI.15790

Amount of Each Receipt this Period
 19.24

Donation

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

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

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 ▼ **240.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : SA11AI.15752

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	48.10
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 37 OF 49
	<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. Linda Parlow
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

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 M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11Al.15753

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

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 ▼ **259.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11Al.15754

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

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 ▼ **240.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11Al.15755

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 38 OF 49
	<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. Katie Reiman
Full Name (Last, First, Middle Initial)

Mailing Address 815 Pecan Drive,

City St Gabriel State LA Zip Code 70776

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 ▼ **250.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11Al.15756

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address 815 Pecan Drive,

City St Gabriel State LA Zip Code 70776

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 ▼ **259.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11Al.15757

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

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

Mailing Address 3341 Quail Run Ct

City Nashville State TN Zip Code 37214

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

Name of Employer LHC Group Occupation Regional Operations Directory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11Al.15800

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **39.24**

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 39 OF 49
	(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. Melisa Rittenberry			Date of Receipt
Mailing Address 3341 Quail Run Ct			<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.15801
Nashville	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		Payroll Deduction (\$20 Bi-Weekly)
LHC Group	Regional Operations Directory		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="520.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Melisa Rittenberry			Date of Receipt
Mailing Address 3341 Quail Run Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.15802
Nashville	TN	37214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		Payroll Deduction (\$20 Bi-Weekly)
LHC Group	Regional Operations Directory		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="540.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. William Sanford			Date of Receipt
Mailing Address 5502 Coteau Road			<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.15778
New Iberia	LA	70560	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		Payroll Deduction (\$10 Bi-Weekly)
LHC Group	CIO		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 40 OF 49
	<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. William Sanford
Full Name (Last, First, Middle Initial)
Mailing Address 5502 Coteau Road

City New Iberia	State LA	Zip Code 70560
--------------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation 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	/	2014

Transaction ID : SA11Al.15779

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

B. William Sanford
Full Name (Last, First, Middle Initial)
Mailing Address 5502 Coteau Road

City New Iberia	State LA	Zip Code 70560
--------------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation CIO
-------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SA11Al.15780

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

C. Albert Simien
Full Name (Last, First, Middle Initial)
Mailing Address 111 Shadowbrook Lane

City Youngsville	State LA	Zip Code 70592
---------------------	-------------	-------------------

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

Name of Employer LGC Group	Occupation Director of Purchasing
-------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
962.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SA11Al.15830

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	58.50
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 41 OF 49
	<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. Albert Simien		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11AI.15831
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 38.50
City Youngsville	State LA	Zip Code 70592
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.50 Bi-Weekly)	
Name of Employer LGC Group	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	

Full Name (Last, First, Middle Initial) B. Albert Simien		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11AI.15832
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 38.50
City Youngsville	State LA	Zip Code 70592
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.50 Bi-Weekly)	
Name of Employer LGC Group	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1039.50	

Full Name (Last, First, Middle Initial) C. Anita Stagg		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15781
Mailing Address 713 Winding Willows		Amount of Each Receipt this Period 10.00
City Bossier City	State LA	Zip Code 71111
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	87.00
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 42 OF 49
	<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. Anita Stagg
Full Name (Last, First, Middle Initial)

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 ▼
260.00

Date of Receipt
12 / 12 / 2014
Transaction ID : SA11AI.15782

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

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

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 ▼
270.00

Date of Receipt
12 / 31 / 2014
Transaction ID : SA11AI.15783

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 1113 Fawn Run

City State Zip Code
Somerset, KY 92501

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

Name of Employer Occupation
LHC Group State Market Development Dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 / 01 / 2014
Transaction ID : SA11AI.15803

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

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 43 OF 49
	<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. 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 ▼ **520.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.15804

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

B. 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 ▼ **540.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15805

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

C. 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 ▼ **962.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15833

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	78.50
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 44 OF 49
(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. Harold Taylor
 Mailing Address 252 Purple Dawn Drive
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 La. Home Care Group, Inc. 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 / 2014
Transaction ID : SA11AI.15834
 Amount of Each Receipt this Period
 38.50
 Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Harold Taylor
 Mailing Address 252 Purple Dawn Drive
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 La. Home Care Group, Inc. Director of Purchasing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1039.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.15835
 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 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 ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.15854
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction (\$100 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 177.00
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 45 OF 49
	<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. 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 ▼ **2600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : SA11AI.15855

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 ▼ **2700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SA11AI.15856

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 ▼ **1250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SA11AI.15851

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: (check only one)	PAGE 46 OF 49
	<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. James Tobey		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11AI.15852
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
		Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. James Tobey		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11AI.15853
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	
		Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Jackie Weeks		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11AI.15758
Mailing Address 4507 Briarwood Terrace,		Amount of Each Receipt this Period 9.62
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.50	
		Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	109.62
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 47 OF 49
	<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. Cynthia Wells		Date of Receipt 12 / 01 / 2014 Transaction ID : SA11Al.15806
Mailing Address 367 Adams Circle		Amount of Each Receipt this Period 20.00
City Crawfordsville	State AR	Zip Code 72327
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Groups	Occupation Hospice Regional Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Cynthia Wells		Date of Receipt 12 / 12 / 2014 Transaction ID : SA11Al.15807
Mailing Address 367 Adams Circle		Amount of Each Receipt this Period 20.00
City Crawfordsville	State AR	Zip Code 72327
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Groups	Occupation Hospice Regional Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Cynthia Wells		Date of Receipt 12 / 31 / 2014 Transaction ID : SA11Al.15808
Mailing Address 367 Adams Circle		Amount of Each Receipt this Period 20.00
City Crawfordsville	State AR	Zip Code 72327
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Groups	Occupation Hospice Regional Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

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: PAGE 48 OF 49
(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. Christa Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : SA11Al.15809
Mailing Address 1549 Camelot Dr, City Henderson State KY Zip Code 42420		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	Payroll Deduction (\$20 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Christa Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : SA11Al.15810
Mailing Address 1549 Camelot Dr, City Henderson State KY Zip Code 42420		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	Payroll Deduction (\$20 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Christa Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : SA11Al.15811
Mailing Address 1549 Camelot Dr, City Henderson State KY Zip Code 42420		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	Payroll Deduction (\$20 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

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: PAGE 49 OF 49
(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. Cheryl Wyatt

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 ▼ **240.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11Al.15759

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Cheryl Wyatt

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11Al.15760

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
c. Cheryl Wyatt

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 ▼ **259.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11Al.15761

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
TOTAL This Period (last page this line number only).....▶	3685.04