

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. 12FE4M5 LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 420 W. Pinhook Road Suite A LAFAYETTE LA 70503 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00382796 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] 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) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) [X] Jan 31 (YE) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 12 / 01 / 2019 through 12 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Simien, Albert, , , Type or Print Name of Treasurer

Signature of Treasurer Simien, Albert, , , [Electronically Filed] Date 01 / 26 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2019"/>		13406.03
(b) Cash on Hand at Beginning of Reporting Period.....	30376.43	
(c) Total Receipts (from Line 19)	56238.38	125520.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	86614.81	138926.81
7. Total Disbursements (from Line 31).....	0.00	52312.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	86614.81	86614.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

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).....	2160.96	59432.88
(ii) Unitemized	306.74	12317.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2467.70	71750.10
(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)	2467.70	71750.10
12. Transfers From Affiliated/Other Party Committees.....	53770.68	53770.68
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)).....▶	56238.38	125520.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	56238.38	125520.78

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	50300.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	2012.00
30. Federal Election Activity (52 U.S.C. § 30101(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	52312.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	52312.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	2467.70	71750.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2467.70	71750.10
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 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Begnaud, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Bellevue Plantation Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP-Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23420
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

B. Brock, Jason, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Rd S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) VP of Strategic Initiatives
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23407
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

C. Clark, Tanya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Rd S
 City Layayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Regional Sales Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23408
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 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 19
	<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. Comeaux, Candance, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23402
 Amount of Each Receipt this Period 19.24
 Memo Item
 Payroll Dedcution (\$9.62 Bi-Weekly)

B. Duhon, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23429
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Dedcution (\$30 Bi-Weekly)

C. Dupree, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Hwy 132
 City Delhi State LA Zip Code 71232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23430
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Dedcution (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	139.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
<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. Fox, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Summerland Key Lane
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) SVP Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23438
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Dedcution (\$50 Bi-Weekly)

B. Galiouras, Jules, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 Woodmont Dr.
 City Convington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23418
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Dedcution (\$20 Bi-Weekly)

C. Gray, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23431
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Dedcution (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 19
	<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. Hardy, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 Rue Katherine,
 City Opelousas State LA Zip Code 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) OT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23403
 Amount of Each Receipt this Period 19.24
 Memo Item
 Payroll Dedcution (\$9.62 Bi-Weekly)

B. Henderson, Adrienne, Davis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Worthington Lane,
 City Parkersburg State WV Zip Code 26104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23404
 Amount of Each Receipt this Period 19.24
 Memo Item
 Payroll Dedcution (\$9.62 Bi-Weekly)

C. Hollier, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Louisiana Health Care Group, I Occupation (for Individual) Legal Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23421
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	88.48
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 10 OF 19
<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. Hooks, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23405
 Amount of Each Receipt this Period 19.24
 Memo Item
 Payroll Dedcution (\$9.62 Bi-Weekly)

B. Indest, Zachary, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) ViP of Clinical Intergration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23422
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

C. Kuehn, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23439
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Dedcution (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	169.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
<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 of Individual (Last, First, Middle Initial) or Full Organization Name A. Laing, Amy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019 Transaction ID : SA11AI.23434
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 80.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Dedcution (\$40 Bi-Weekly)
Name of Employer (for Individual) LHC Group	Occupation (for Individual) State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lege, Jude, T., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019 Transaction ID : SA11AI.23423
Mailing Address 13806 Elk Road		Amount of Each Receipt this Period 50.00
City Abbeville	State LA	Zip Code 70510
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Dedcution (\$25 Bi-Weekly)
Name of Employer (for Individual) LHC	Occupation (for Individual) Directors of Nursing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Little, JoAnne, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2019 Transaction ID : SA11AI.23435
Mailing Address 901 Hugh Wallis Road, S		Amount of Each Receipt this Period 80.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Dedcution (\$40 Bi-Weekly)
Name of Employer (for Individual) LHC Groups	Occupation (for Individual) Sr. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1040.00	

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: (check only one)	PAGE 12 OF 19
<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. Little, Rob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 910 Briarwood
 City Nashville State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Divisional Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23409
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

B. MacMillian, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4940.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23441
 Amount of Each Receipt this Period 380.00
 Memo Item
 Payroll Dedcution (\$190 Bi-Weekly)

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

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23410
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	420.00
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 19
	<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. May, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Rd S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Hospital Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23411
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

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

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23412
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

C. Munholland, Clea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Comanche Circle
 City Monroe State LA Zip Code 71291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Admrstrator - LTAC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23413
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
	<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. Myers, Brach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Worth Ave.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Vice President of Strategic Partnershi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23436
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Dedcution (\$40 Bi-Weekly)

B. Myers, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Morning Mist
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6040.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23437
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Dedcution (\$40 Bi-Weekly)

C. Ransom, Gordon, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5468 Covered Bridge Lane
 City Pace State FL Zip Code 32571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) National Therapy Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23414
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 19
	<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	<input type="checkbox"/> 18

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

A. Robinson, Rodger, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 Martinsburg Cove
 City Collierville State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area VP of Operations - Hospice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23424
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

B. Sanford, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) LHC Group Occupation (for Individual) CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23415
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

C. Seymour, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 Fyvie Lane
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Internal Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23416
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 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 16 OF 19
	<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. Simien, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LGC Group Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23432
 Amount of Each Receipt this Period 77.00
 Memo Item
 Payroll Dedcution (\$38.50 Bi-Weekly)

B. Simmons, Kermit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Rue Christopher Crossing
 City Natchitoches State LA Zip Code 71457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP of Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23425
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

C. Stagg, Anita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 Winding Willows
 City Bossier City State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23426
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 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 17 OF 19
	<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. Taylor, Harold, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) La. Home Care Group, Inc. Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23433
 Amount of Each Receipt this Period 77.00
 Memo Item
 Payroll Dedcution (\$38.50 Bi-Weekly)

B. Tobey, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 Leo Avenue
 City Shreveport State LA Zip Code 71105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Sales and Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23440
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Dedcution (\$50 Bi-Weekly)

C. Wells, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 Adams Circle
 City Crawfordsville State AR Zip Code 72327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Groups Occupation (for Individual) Hospice Regional Operations Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23417
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Dedcution (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	197.00
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 19
<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. Williams, Christa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1549 Camelot Dr,
 City Henderson State KY Zip Code 42420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23419
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Dedcution (\$20 Bi-Weekly)

B. Willis, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 Norcross Drive
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) VP of Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23427
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

C. Ziegler, Diana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Thompson Loop
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Revenue Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 19 / 2019
Transaction ID : SA11AI.23428
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Dedcution (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	2160.96

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

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

FOR LINE NUMBER: PAGE 19 OF 19
(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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. ALMOST FAMILY INC PAC (AFAM PAC)

Mailing Address 9510 ORMSBY STATION ROAD SUITE 300

City LOUISVILLE State KY Zip Code 40223

FEC ID number of contributing federal political committee. **C** C00460253

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 53770.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2019

Transaction ID : SA12.23354

Amount of Each Receipt this Period
 53770.68

Memo Item
 Transfer Funds

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	53770.68
TOTAL This Period (last page this line number only).....▶	53770.68