

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Gulf Coast Bank & Trust WAVE PAC

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="2018"/> | <input type="text" value="15646.98"/> | <input type="text" value="15646.98"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="3951.90"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1674.19"/> | <input type="text" value="21679.11"/> |
| (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="5626.09"/> | <input type="text" value="37326.09"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="0.00"/> | <input type="text" value="31700.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="5626.09"/> | <input type="text" value="5626.09"/> |
| 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

Gulf Coast Bank & Trust WAVE PAC

Report Covering the Period: From: / / 2018 To: / / 2018

| 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)..... | 1674.00 | 15339.00 |
| (ii) Unitemized | 0.00 | 6282.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 1674.00 | 21621.50 |
| (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) | 1674.00 | 21621.50 |
| 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.)..... | 0.19 | 57.61 |
| 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)).....▶ | 1674.19 | 21679.11 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1674.19 | 21679.11 |

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 | 31700.00 |
| 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 | 0.00 |
| 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 | 31700.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 31700.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 1674.00 | 21621.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1674.00 | 21621.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 32
(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 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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)
Gulf Coast Bank & Trust WAVE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMOS, CATHERINE, , ,

Mailing Address 5420 ALPACA DRIVE

| | | |
|-----------------|-------------|-------------------|
| City MARRERO | State LA | Zip Code 70072 |
|-----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) OPERATIONS OFFICER |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
182.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12491

Amount of Each Receipt this Period
14.00

Memo Item
\$7.00/BI-WEEKLY PAYROLL

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

Mailing Address 60 LONGWOOD DRIVE

| | | |
|-----------------|-------------|-------------------|
| City MARRERO | State LA | Zip Code 70072 |
|-----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) BRANCH MANAGER |
|--|---|

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 | | 28 | | 2018 |

Transaction ID : SA11AI.12496

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 2744 ACORN STREET

| | | |
|-----------------|-------------|-------------------|
| City MARRERO | State LA | Zip Code 70072 |
|-----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) LOAN SRVC SPECIALIST |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
78.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12472

Amount of Each Receipt this Period
6.00

Memo Item
\$3.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| 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: PAGE 7 OF 32
(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)
Gulf Coast Bank & Trust WAVE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BEHLAR, BRIAN, , ,

Mailing Address 2612 INGRID LANE

| | | |
|------------------|-------------|-------------------|
| City METAIRIE | State LA | Zip Code 70003 |
|------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MRK MGR/COMMERCIAL LENDER |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
182.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2018 |

Transaction ID : SA11AI.12492

Amount of Each Receipt this Period
14.00

Memo Item
\$7.00/BI-WEEKLY PAYROLL

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

Mailing Address 73507 PLANTATION STREET

| | | |
|-------------------|-------------|-------------------|
| City COVINGTON | State LA | Zip Code 70435 |
|-------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) COMMERCIAL LENDER |
|--|--|

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 | / | 28 | / | 2018 |

Transaction ID : SA11AI.12497

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 15197 AMANDA DRIVE

| | | |
|------------------|-------------|-------------------|
| City GONZALES | State LA | Zip Code 70737 |
|------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MRK MGR/COMMERCIAL LENDER |
|--|--|

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 | / | 28 | / | 2018 |

Transaction ID : SA11AI.12498

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 54.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. BORDELON, HART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 UNIVERSITY DRIVE
 City HAMMOND State LA Zip Code 70401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MARKET PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12499
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

B. BRAUD, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N. ATLANTA STREET
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12455
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

C. CALDWELL, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4843 CHESTNUT STREET
 City NEW ORLEANS State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) VP COMPLIANCE/CR ADM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12500
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 42.00 |
| 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 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. CARDEN, KARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 ALEXANDER DRIVE
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) LENDING PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 182.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12493
 Amount of Each Receipt this Period 14.00
 Memo Item \$7.00/BI-WEEKLY PAYROLL

B. CARPENTER, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30858 E. KNIGHT DRIVE
 City DENHAM SPRINGS State LA Zip Code 70726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) UNDERWRITING MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12476
 Amount of Each Receipt this Period 10.00
 Memo Item \$5.00/BI-WEEKLY PAYROLL

C. CARTER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MADERA CT.
 City KENNER State LA Zip Code 70065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12501
 Amount of Each Receipt this Period 20.00
 Memo Item \$10.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 44.00 |
| 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 10 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. CARVER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CARRIAGE LANE
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST HR DIRECTOR/VP GOV. RELATIONS
 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 / 28 / 2018
Transaction ID : SA11AI.12516
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$15.00/BI-WEEKLY PAYROLL

B. CRESCIONI, MONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 METAIRIE HTS
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST EXECUTIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12477
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$5.00/BI-WEEKLY PAYROLL

C. CZERNIAK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEBSTER STREET
 City NEW ORLEANS State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST SR VP OF OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12529
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50.00/BI-WEEKLY PAYROLL

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 140.00 |
| 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 11 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. DASTE, JOEL, , , Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6004 CANAL BLVD.

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70124 |
|---------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) DIVISION PRESIDENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 12 / 28 / 2018 |

Transaction ID : SA11AI.12518

Amount of Each Receipt this Period
40.00

Memo Item
\$20.00/BI-WEEKLY PAYROLL

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

Mailing Address 2319 BRIXHAM AVE.

| | | |
|-----------------|-------------|-------------------|
| City ORLANDO | State FL | Zip Code 32828 |
|-----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) CHIEF CREDIT OFFICER |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 12 / 28 / 2018 |

Transaction ID : SA11AI.12502

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 3521 JUDY DRIVE

| | | |
|----------------|-------------|-------------------|
| City MEREAX | State LA | Zip Code 70075 |
|----------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MTG LOAN ORIGINATOR |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| |
|-----------------------|
| M M / D D / Y Y Y Y Y |
| 12 / 28 / 2018 |

Transaction ID : SA11AI.12503

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| 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 12 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. DICKY, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 FOREST OAKS DR.
 City NEW ORLEANS State LA Zip Code 70131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CONSUMER BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12528
 Amount of Each Receipt this Period 70.00
 Memo Item \$35.00/BI-WEEKLY PAYROLL

B. FAGOT, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 COTTONWOOD COURT
 City SLIDELL State LA Zip Code 70461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) QUALITY CONTROL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12461
 Amount of Each Receipt this Period 4.00
 Memo Item \$2.00/BI-WEEKLY PAYROLL

C. FALKENSTEIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 BEECHWOOD GARDENS DRIVE
 City COVINGTON State LA Zip Code 70435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) EXEC VP COMMERCIAL LENDING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12519
 Amount of Each Receipt this Period 40.00
 Memo Item \$20.00/BI-WEEKLY PAYROLL

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 114.00 |
| 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 13 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FAMULARO, SUSAN, , ,

Mailing Address 822 N. TURNBULL DR.

City METAIRIE State LA Zip Code 70001

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

Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER

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 / 28 / 2018

Transaction ID : SA11AI.12504

Amount of Each Receipt this Period
 20.00

Memo Item
 \$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 237 LILLYBANK DRIVE

City BELLE CHASSE State LA Zip Code 70037

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

Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018

Transaction ID : SA11AI.12520

Amount of Each Receipt this Period
 40.00

Memo Item
 \$20.00/BI-WEEKLY PAYROLL

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

Mailing Address 105 LEIGHTON STREET

City GRETNA State LA Zip Code 70053

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

Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) SENIOR CREDIT OFFICER

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 / 28 / 2018

Transaction ID : SA11AI.12525

Amount of Each Receipt this Period
 50.00

Memo Item
 \$25.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. FITTS, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 DUMAS WISE RD.
 City CARRIERE State MS Zip Code 39426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BRANCH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 78.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12473
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$3.00/BI-WEEKLY PAYROLL

B. GIONET, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6385 13TH AVE. S
 City GULFPORT State FL Zip Code 33707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12478
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$5.00/BI-WEEKLY PAYROLL

C. GUIDRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 TOPAZ STREET
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) SALES DEVELOPMENT OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12515
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$12.50/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 41.00 |
| 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 15 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. HEIDEN, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 OLIVE AVE
 City HARVEY State LA Zip Code 70058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 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 / 28 / 2018
Transaction ID : SA11AI.12505
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

B. HENDERSON, SHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25612 ROSEDOWN DR
 City DENHAM SPRINGS State LA Zip Code 70726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MORTGAGE LOAN PROCESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12462
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

C. HERRMANN, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FOREST RIDGE BLVD
 City PEARL RIVER State LA Zip Code 70452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS MANAGER
 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 / 28 / 2018
Transaction ID : SA11AI.12507
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 44.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 16 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. HINGLE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 YVONNE DRIVE
 City AVONDALE State LA Zip Code 70094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 78.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12474
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$3.00/BI-WEEKLY PAYROLL

B. HLADKY, WADE MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1519 ARISTOCRAT DRIVE
 City COVINGTON State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BC PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12521
 Amount of Each Receipt this Period 40.00
 Memo Item
 \$20.00/BI-WEEKLY PAYROLL

C. HOLLIER, GREGORY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 METAIRIE COURT
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12522
 Amount of Each Receipt this Period 40.00
 Memo Item
 \$20.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 86.00
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 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. HRUBES, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 JANET DRIVE
 City ST. ROSE State LA Zip Code 70087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COST BANK & TRUST MORTGAGE LOAN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12463
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

B. JACKSON-BLAKE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 ROBBINS REST CIRCLE
 City DAVENPORT State FL Zip Code 33896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST INVOICE PRO ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12456
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

C. JENKINS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10222 N. HARVEY DRIVE
 City BATON ROUGE State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRST OPERATIONS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 156.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12483
 Amount of Each Receipt this Period 12.00
 Memo Item
 \$6.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 18.00
TOTAL This Period (last page this line number only).....▶

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 18 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. JONES, MILLICENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 GRAND CAYON DRIVE
 City NEW ORLEANS State LA Zip Code 70131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) DR. OF EDUCATION SERV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12526
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$25.00/BI-WEEKLY PAYROLL

B. KENNEDY, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 HESPER AVE
 City METAIRIE State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST OPS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 156.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12533
 Amount of Each Receipt this Period 12.00
 Memo Item
 \$6.00/BI-WEEKLY PAYROLL

C. KYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MAGNOLIA LANE
 City SLIDELL State LA Zip Code 70461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12506
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 82.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. KYLE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MAGNOLIA LANE
 City SLIDELL State LA Zip Code 70461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MGR SPECIAL ASSETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 182.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12494
 Amount of Each Receipt this Period 14.00
 Memo Item
 \$7.00/BI-WEEKLY PAYROLL

B. LATERRADE, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SPANISH MOSS CT
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12488
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10.00/MONTHLY PAYROLL

C. LAVIERI, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 70TH STREET N
 City ST. PETERSBURG State FL Zip Code 33710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 26.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12458
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 26.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 20 OF 32
(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)
Gulf Coast Bank & Trust WAVE PAC

A. LIGGANS, ALFRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 E GREENBRIER DRIVE

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70128 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) TRUST MANAGER |
|--|--|

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 | | 28 | | 2018 |

Transaction ID : SA11AI.12508

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 1165 MELANIE STREET

| | | |
|---------------------|-------------|-------------------|
| City Baton Rouge | State LA | Zip Code 70806 |
|---------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MARKET PRESIDENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12530

Amount of Each Receipt this Period
100.00

Memo Item
\$50.00/BI-WEEKLY PAYROLL

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

Mailing Address 3113 BRADBURY DRIVE

| | | |
|----------------|-------------|-------------------|
| City MERAUX | State LA | Zip Code 70075 |
|----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MGR SPECIAL ASSETS |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
130.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12479

Amount of Each Receipt this Period
10.00

Memo Item
\$5.00/BI-WEEKLY PAYROLL

| | |
|---|--------|
| 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 21 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. MAGGIO, JENNIFER DUPRE, Dupre, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 HEATHER DR
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BUSINESS SOLUTIONS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12480
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$5.00/BI-WEEKLY PAYROLL

B. MANDULA, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 BRIGHTWATERS BLVD., NE
 City ST. PETERSBURG State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CHIEF MARKETING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12531
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50.00/BI-WEEKLY PAYROLL

C. MANOUSIADES, THEODORUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 156TH TERRACE E
 City PARISSH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) ACCOUNT EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 26.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12459
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 112.00 |
| 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 22 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. NAVARRE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 NAVARRE LN
 City BELLE CHASSE State LA Zip Code 70037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) RETAIL FINANCIAL REP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 182.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12495
 Amount of Each Receipt this Period 14.00
 Memo Item
 \$7.00/BI-WEEKLY PAYROLL

B. NICHOLS, LOUANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2940 PENWOOD DRIVE
 City GRETNA State LA Zip Code 70056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CALL CENTER SUPERVISOR
 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 / 28 / 2018
Transaction ID : SA11AI.12509
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

C. NUGENT, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 DONA AVENUE
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) LOAN PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12464
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 38.00 |
| 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 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. OGG, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6044 CAMP STREET

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70118 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MRK MGR/COMMERCIAL LENDER |
|--|--|

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 | | 28 | | 2018 |

Transaction ID : SA11AI.12510

Amount of Each Receipt this Period
20.00

Memo Item
\$10.00/BI-WEEKLY PAYROLL

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

Mailing Address 700 NEWTON STREET

| | | |
|----------------|-------------|-------------------|
| City GRETNA | State LA | Zip Code 70053 |
|----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) DR OF LOAN PORTFOLIO |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
156.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12484

Amount of Each Receipt this Period
12.00

Memo Item
\$6.00/BI-WEEKLY PAYROLL

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

Mailing Address 44 MARIE DR

| | | |
|----------------|-------------|-------------------|
| City GRETNA | State LA | Zip Code 70053 |
|----------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MRK MGR/COMMERCIAL LENDER |
|--|--|

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 | | 28 | | 2018 |

Transaction ID : SA11AI.12523

Amount of Each Receipt this Period
40.00

Memo Item
\$20.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 72.00 |
| 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 24 OF 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. PARKER, ROBERT, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 BARRETT DR.
 City LULING State LA Zip Code 70070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12489
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10.00/MONTHLY PAYROLL

B. PATERNOSTRO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2653 DOVE AVE
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) VP OF SPECIAL ASSETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12511
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

C. PATTON, CHLOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1666 ABUNDANCE ST.
 City NEW ORLEANS State LA Zip Code 70119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) RELATIONSHIP BANKER I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 26.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12460
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 32.00 |
| 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 25 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. QUEY, IAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2653 SEA SHORE DRIVE
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) RELATIONSHIP BANKER I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12481
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$5.00/BI-WEEKLY PAYROLL

B. RICHARDS, TROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 MOLDANDER COURT
 City PEARL RIVER State LA Zip Code 70452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 36.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12465
 Amount of Each Receipt this Period 3.00
 Memo Item
 \$3.00/MONTHLY PAYROLL

C. RIESS, GUS, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 ROSETTA DR
 City CHALMETTE State LA Zip Code 70043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MARKET PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 156.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12485
 Amount of Each Receipt this Period 12.00
 Memo Item
 \$6.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
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 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. ROY, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 CORRINE DRIVE
 City CHALMETTE State LA Zip Code 70043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BRANCH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 78.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12475
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$3.00/BI-WEEKLY PAYROLL

B. SCHEUERMANN, JOANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 WEST PINEWOOD DR.
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2018
Transaction ID : SA11AI.12457
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00/BI-WEEKLY PAYROLL

C. SIMONS, SLADE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7615 JEANETTE STREET
 City NEW ORLEANS State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) EXEC VP WEALTH MANAGER
 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 / 28 / 2018
Transaction ID : SA11AI.12524
 Amount of Each Receipt this Period 40.00
 Memo Item
 \$20.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 48.00 |
| 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 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. SMITH, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 SERE STREET
 City NEW ORLEANS State LA Zip Code 70122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMPLIANCE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12466
 Amount of Each Receipt this Period 4.00
 Memo Item \$2.00/BI-WEEKLY PAYROLL

B. SMITH, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 ROSA AVENUE
 City METAIRIE State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12512
 Amount of Each Receipt this Period 20.00
 Memo Item \$10.00/BI-WEEKLY PAYROLL

C. SMITH, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 MORNINGSIDE DRIVE
 City GRETNA State LA Zip Code 70056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MORTGAGE LOAN PROCESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12467
 Amount of Each Receipt this Period 4.00
 Memo Item \$2.00/BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 28.00
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 28 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. SPENCER, MICKEY TAYLOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 BATH STREET
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12513
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

B. TALAMO, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4726 DOWNING DRIVE
 City BATON ROUGE State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12490
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10.00/MONTHLY PAYROLL

C. TONDREAU, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4681 32ND AVE W
 City ST. PETERSBURG State FL Zip Code 33713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) STAFF ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12468
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 34.00 |
| 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 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. TOSO, BRIEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1312 BROADWAY STREET

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70118 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) OPERATIONS DEPT MANAGER |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
52.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12469

Amount of Each Receipt this Period
4.00

Memo Item
\$2.00/BI-WEEKLY PAYROLL

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

Mailing Address 5053 CRAIG AVENUE

| | | |
|----------------|-------------|-------------------|
| City KENNER | State LA | Zip Code 70065 |
|----------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MTG LOAN ORIGINATOR |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12517

Amount of Each Receipt this Period
30.00

Memo Item
\$15.00/BI-WEEKLY PAYROLL

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

Mailing Address 1184 BROOK COURT

| | | |
|--------------------|-------------|-------------------|
| City MANDEVILLE | State LA | Zip Code 70448 |
|--------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) GULF COAST BANK & TRUST | Occupation (for Individual) MTG LOAN ORIGINATOR |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
120.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 28 | | 2018 |

Transaction ID : SA11AI.12482

Amount of Each Receipt this Period
10.00

Memo Item
\$5.00/BI-WEEKLY PAYROLL

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 44.00 |
| 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 32 |
| | <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)
Gulf Coast Bank & Trust WAVE PAC

A. VAN HOVEN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6168 CORBERT ST.
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12527
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$25.00/BI-WEEKLY PAYROLL

B. WARNER, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2316 CHALONA DRIVE
 City CHALMETTE State LA Zip Code 70043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERICAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 156.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12487
 Amount of Each Receipt this Period 12.00
 Memo Item
 \$6.00/BI-WEEKLY PAYROLL

C. WILLIAMS, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SWALLOW ST
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12532
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50.00/BI-WEEKLY PAYROLL

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 162.00 |
| 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 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. WINCHESTER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 MORALES STREET
 City METAIRIE State LA Zip Code 70006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) APPRAISAL REVIEW REP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12470
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

B. WOOD, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4240 ILLINOIS AVE
 City KENNER State LA Zip Code 70065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12471
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00/BI-WEEKLY PAYROLL

C. WRBA, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1622
 City CUMMINGS State GA Zip Code 30028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 28 / 2018
Transaction ID : SA11AI.12514
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$10.00/BI-WEEKLY PAYROLL

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 28.00 |
| TOTAL This Period (last page this line number only)..... | 1674.00 |

**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 32 OF 32 |
| <input 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 checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. GULF COAST BANK & TRUST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 N. CARROLLTON AVE.

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70119 |
|---------------------|-------------|-------------------|

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 ▼
57.52

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 30 | | 2018 |

Transaction ID : SA17.12534

Amount of Each Receipt this Period
0.10

Memo Item
INTEREST INCOME

B. GULF COAST BANK & TRUST
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 N. CARROLLTON AVE.

| | | |
|---------------------|-------------|-------------------|
| City NEW ORLEANS | State LA | Zip Code 70119 |
|---------------------|-------------|-------------------|

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 ▼
57.61

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2018 |

Transaction ID : SA17.12535

Amount of Each Receipt this Period
0.09

Memo Item
INTEREST INCOME

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

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 M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.19 |
| TOTAL This Period (last page this line number only).....▶ | 0.19 |