04/20/2006 22:20

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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT W over the lines LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC ADDRESS (number and street) Check if different than previously reported (ACC)	1
ADDRESS (number and street) 420 W. Pinhook Road	1
ADDRESS (number and street) 420 W. Pinhook Road	
ADDRESS (number and street) Suite A Check if different than previously LAFAYETTE LAFAYETTE LAFAYETTE LAFAYETTE	
Check if different than previously LAFAYETTE LA LA TOSOS L	
reported. (ACC)	
2. FEC IDENTIFICATION NUMBER V CITY A STATE ZIPCOI	DE 🛦
C00382796 3. IS THIS REPORT X NEW (N) OR (A)	
4. TYPE OF REPORT (b) Monthly (Choose One) (b) Monthly Report Feb 20 (M2) May 20 (M5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports: Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 X Apr 20 (M4) Jul 20 (M7) Oct 20 (M10)	Jan 31 (YE)
Quarterly Report(Q1) July 15 (c) 12-Day Primary (12P) General (12G)	Runoff (12R)
Quarterly Report(Q2) PRE-Election Report for the: Convention (12C) Special (12G)	
October 15 Quarterly Report(Q3)	
January 31 in the Quarterly Report(YE) Election on State of	of Line
July 31 Mid-Year Report(Non-election Year Only) (MY) Output (d) 30-Day Post -Election General (30G) Runoff (30R)	Special (30S)
Termination Report Report for the:	
(TER) in the State of	of
5. Covering Period 03 01 2006 through 03 31 2006	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	
Type or Print Name of Treasurer Jimmy Gravois	
Signature of Treasurer Electronically Filed by Jimmy Gravois Date 0 4 2 0	2006
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.	S.C 437g.
Office Use Only	

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

R	epor	t Covering the Period:	From:	м м 0 3	0 1	2006	To:	03	31	2006
				_		COLUMN A This Period			COLUMN dar Year-t	
6.	(a)	Cash on Hand January 1	[°] 2006 [°]	Y						2717.43
	(b)	Cash on Hand at Begining of Reporting F	eriod	[2770.93				
	(c)	Total Receipts (from Lin	ne 19)	[447.00				1500.50
	(d)	Subtotal (add lines 6(b) 6(c) for Column A and I 6(a) and 6(c) for Column	_ines	[3217.93		• • •		4217.93
7.	Tota	al Disbursements (from L	ine 31)			1000.00				2000.00
3.	Rep	sh on Hand at Close of porting Period otract Line 7 from Line 6(d))	_ [2217.93				2217.93
Э.	the	ots and Obligations owed committee (Itemize all on needule C and/or Schedule		_ [0.00				
10.	the	ots and Obligations owed committee (Itemize all on nedule C and/or Schedule		_ [0.00				
		This Committee has qua	alified as a mu	Iticandidate	committee.	(see FEC FORM 1M)				
				For	further in	formation contact:				
				Fe	999 E s	on Commission treet, NW on, DC 20463				

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

DETAILED SUMMARY PAGE OF RECEIPTS

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Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

0 1 М М 03 3^D1 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 118.50 118.50 (i) Itemized (use Schedule A) 328.50 1382.00 (ii) Unitemized (iii) TOTAL (add 447.00 1500.50 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 447.00 1500.50 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 447.00 1500.50 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 447.00 1500.50 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	1000.00	2000.00
	Independent Expenditure	0.00	0.00
	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
•	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	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	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
า	Federal Election Activity (2 U.S.C 431(20))		
•	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(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
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1000.00	2000.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	4000.00	2022.20
	from Line 31)	1000.00	2000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Ne	et Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ibutions (other than loans) 1(d), page 3)	447.00	1500.50
	ibution Refunds 28(d))	0.00	0.00
	utions (other than loans) ne 34 from Line 33)	447.00	1500.50
	al Operating Expenditures 1(a)(i) and Line 21(b))	0.00	0.00
	Operating Expenditures	0.00	0.00
•	ng Expenditures ne 37 from Line 36)	0.00	0.00

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/7
	EMIZED RECEIPTS		or each category of the	(check only one)
·			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any	r information copied from such Reports and Statemen	nts may	not be sold or used by any person	n for the purpose of soliciting contributions
	or commercial purposes, other than using the name a	and addi	ress of any political committee to	solicit contributions from such committee.
١.	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP EMPLO	OVEE	FEDERAL POLITICAL ACTI	ON COMMITTEE INC
	EOOIOIANA TIEAETTI OATE GITOOF EINI EC	OILL	I EDENAL I OLITIOAL AOTI	ON GOIVIIVITTEE ING
	Full Name (Last, First, Middle Initial) John Indest			Date of Receipt
•	Mailing Address 235 Duperier Ave.			M M / D D / Y Y Y Y
	<u> </u>			03 21 2006
	•	tate ^	Zip Code	Transaction ID: SA11A1.4793
•		<u> </u>	70563	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	;		40.00
•	Name of Employer Occ	cupation		Payroll Deduction (\$40 Bi- Weekly)
		/COO		
		gregate	Year-to-Date ▼	
	Primary General Other (specify)		240.00	
		-		
_	Full Name (Last, First, Middle Initial) Keith Myers			Date of Receipt
	Mailing Address 211 Morning Mist			03 21 2006
	City St.	tate	Zip Code	Transaction ID: SA11A1.4794
	Sunset LA		70584	Amount of Each Receipt this Period
	FEC ID number of contributing	T '		40.00
	federal political committee.			
Name of Employer Occup				Payroll Deduction (\$40 Bi- Weekly)
		esident/		
	Receipt For: Agg	gregate	Year-to-Date ▼	
	Other (specify)		240.00	
	Full Name (Last, First, Middle Initial) Harold Taylor			Date of Receipt
	Mailing Address 252 Purple Dawn Drive			M M / D D / Y Y Y Y
	·			03 21 2006
	City Stanset LA	tate ^	Zip Code 70584	Transaction ID: SA11A1.4798
•	EEC ID assessment of a contribution		70304	Amount of Each Receipt this Period
	federal political committee.			38.50
•	Name of Employer La. Home Care Group, Inc.	cupation		Payroll Deduction (\$38.50 Bi-Weekly)
	La. Home Care Group, Inc.	ector o	f Purchasing	_ Bi Weday)
		gregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		231.00	
		0 0		
<u> </u>	IDTOTAL of Descints This David (cuttors)			118.50
50	JBTOTAL of Receipts This Page (optional)		<u> </u>	
тс	OTAL This Period (last page this line number only)		•	118.50

S	CHEDULE B (FEC Form 3X)	Use sep	Use seperate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 7 / (check only one)								7/7	7			
IT	EMIZED DISBURSEMENTS	for each				eck onl 21b 27	ly o	ne) 22 28a	X	23 28b		24 28c		25 29		26 30b		
	y Information copied from such Reports and Sta for commercial purposes, other than using the r														3			
\rangle	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP E	EMPLOYEE F	EDERAL POLI	TICA	AL A	ACTIC	DΝ	COM	MΙ	ГТЕЕ	IN	0						
۹.	Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD Mailing Address PO BOX 812							Date c		isburse		323.48 ent		0 Ŏ 6	Y			
	City BISMARCK Purpose of Disbursement Donation	State ND	Zip Code 58502		012			Amou	nt o	f Each	Dis	burser	-	t this F		od		
	Candidate Name FRIENDS OF KENT CONRAD			Cat	tegoi ype	ry/												
	Office Sought: House Disb X Senate President State: ND District: 00	oursement For: X Primary Other (specific	2006 General															

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	1000.00