		_		PAGE 1 / 14
ND DISBURS	EMENT	s	Office	lse Only
PE OR PRINT V		ng, type 1		
	over the lines.			
20 W. Pinhook Road				
Suite A				
			LA 7050	3
		ST	ATE 🔺	ZIP CODE
		-	AMENDED (A)	
Report Due On:			Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11 (Non-Election Year Only) Dec 20 (M12 (Non-Election Year Only)
Apr 20	(M4) ×	Jul 20 (M7)	Oct 20 (M10)	
(c) 12-Day	Primary (12F	P)	General (12G)	Runoff (12R)
Report for the:	Convention (	(12C)	Special (12S)	
	M M /	DD/Y	YYYY	in the
	n			State of
(d) 30-Day <b>POST</b> -Election Report for the:	General (300	G)	Runoff (30R)	Special (30S)
Election of	n /	D D / Y	Y Y Y	in the State of
01 2016	through	M M /		116
eport and to the best of my	knowledge and	belief it is true,	correct and comple	ete.
Albert Simien				
iien	[Electronicall	y Filed] Date		D / Y Y Y Y 2016
, or incomplete information m	ay subject the per-	son signing this	Report to the penal	ies of 2 U.S.C. §437g.
				C FORM 3X Rev. 12/2004
	ND DISBURS         Other Than An Author         PE OR PRINT ▼         E GROUP EMPLOYE         20 W. Pinhook Road         Suite A         20 W. Pinhook Road         Suite A         AFAYETTE         Ser ▼       CITY A         3. IS T         Report         Due On:       Mar 20         (b) Monthly       Feb 20         Due On:       Mar 20         (c) 12-Day       PRE-Election         Report for the:       Election of         (d) 30-Day       POST-Election         Report for the:       Election of         (d) 30-Day       Election of         (d) 30-Day       Election of         (d) 30-Day       Election of         (eport and to the best of my       Election of         Mort Simien       Elec	ND DISBURSEMENT:         Other Than An Authorized Committee         YE OR PRINT ▼       Example: If typicover the lines.         EGROUP EMPLOYEE FEDERAL I         20 W. Pinhook Road         AFAYETTE         20 W. Pinhook Road         AFAYETTE         Sa IS THIS         REPORT         X         Sa IS THIS         Report         Due On:         Mar 20 (M3)         Apr 20 (M4)         X         (c)         12-Day         PRE-Election         Report for the:         Convention (         (d)         30-Day         POST-Election n         Report for the:         Convention (         Election on         (d)         30-Day         POST-Election         Report for the:         Convention (         (d)         30-Day         POST-Election n         Report for the:         Election on         (d)         101         (eport and to the best of my knowledge and thermal provements of the sector my knowledge and thermal protent for the sector my knowledge and thermal	aver the lines.         E GROUP EMPLOYEE FEDERAL POLITICAL         20 W. Pinhook Road         suite A         AFAYETTE	ND DISBURSEMENTS Other Than An Authorized Committee       Office L         YE OR PRINT ▼       Example: If typing, type over the lines.       12FE4M5         E GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMINATION COMPLETED STATE       ACTION COMPLETED STATE         20 W. Pinhook Road

07/20/2016 19 : 20

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

F	Report	Covering the Period: From:	06 01 Y Y Y Y Y 2016 7	To: 06 / 06 / Y Y Y Y Y 06 30 / 2016
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a)	Cash on Hand January 1, 2016		12700.92
	(b)	Cash on Hand at Beginning of Reporting Period	7516.15	
	(c)	Total Receipts (from Line 19)	4097.82	15913.08
	(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11613.97	28614.00
7.	Tota	I Disbursements (from Line 31)	6512.00	23512.03
8.	Rep	h on Hand at Close of orting Period tract Line 7 from Line 6(d))	5101.97	5101.97
9.	the	ts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed <b>BY</b> Committee (Itemize all on edule 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

X

1		004	007			00704
ш	iaue#	201	00/	2090	JZ   /	03724

### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

#### LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC М M D D Y Y M D 06 30 2016 Report Covering the Period: 06 01 2016 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 3781.24 9106.72 (i) Itemized (use Schedule A)..... 316.58 6806.36 (ii) Unitemized ..... (iii) TOTAL (add 15913.08 4097.82 Lines 11(a)(i) and (ii)..... 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 15913.08 4097.82 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 Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 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 (c) Total Transfers (add 18(a) and 18(b)).. 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))...... 4097.82 15913.08 20. Total Federal Receipts 4097.82 15913.08 (subtract Line 18(c) from Line 19) ......►

I

### DETAILED SUMMARY PAGE

	II. Disbursements	COLUMN A	COLUMN B
. On	erating Expenditures:	Total This Period	Calendar Year-to-Date
	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	0.00	0.00
(c)	Expenditures Total Operating Expenditures	0.00	0.00
(0)	(add 21(a)(i), (a)(ii), and (b))►	0.00	0.00
Tra	insfers to Affiliated/Other Party		
	mmittees	0.00	0.00
Fe	ntributions to deral Candidates/Committees d Other Political Committees		22500.00
		6500.00	23500.00
	ependent Expenditures	0.00	0.00
Co	e Schedule E) ordinated Party Expenditures		
(2 (us	U.S.C. §441a(d)) e Schedule F)	0.00	0.00
Loa	an Repayments Made	0.00	0.00
		0.00	0.00
	ans Made funds of Contributions To:	0.00	
	Individuals/Persons Other Than Political Committees	0.00	0.00
	man Folitical Committees		
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees		
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds	0.00	
	(add Lines 28(a), (b), and (c)) ►		0.00
. Otł	ner Disbursements	12.00	12.03
Fee	deral Election Activity (2 U.S.C. §431(20))		
(a)	2		
	(from Schedule H6)	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
-			
	al Disbursements (add Lines 21(c), 22,		
23,	24, 25, 26, 27, 28(d), 29 and 30(c))	6512.00	23512.03
Tot	al Federal Disbursements		
	btract Line 21(a)(ii) and Line 30(a)(ii)		
	m Line 31)	6512.00	23512.03
		7 7 7 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

L

### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures				
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	4097.82	15913.08		
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4097.82	15913.08		
add Line 21(a)(i) and Line 21(b))	0.00	0.00		
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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14

11	EMIZED RECEIPTS		tor each category of the Detailed Summary Page		11a 13		11b 14	11c	12 16	17							
	y information copied from such Reports and S for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GRC	UP EMPI	LOYEE FEDERAL POLI	TICA	AL AC	CTIC	ON C	OMMI	TTEE	INC							
<u> </u>	Full Name (Last, First, Middle Initial) Chris Duhon				Date o	f Re	ceipt										
	Mailing Address 10429 Rue de Duhon				06 03 _ 2016 _												
	City	State	Zip Code		Transaction ID : SA11AI.18074												
	Abbeville	LA	70510		Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С		30.00													
	Name of Employer	Occupation	1			emo li											
	LHC Group	RN		P	Payroll I	Dedu	ction (	\$30 Bi-W	eekly)								
	Receipt For: Primary General Other (specify) ▼	General Aggregate Year-to-Date ▼															
В.	Full Name (Last, First, Middle Initial) Ronda Dupree						ceipt										
	Mailing Address 130 Hwy 132							06 03 2016									
	City	State	Zip Code		Trans	sacti	on ID :	SA11AI.	18075								
	Delhi	LA	71232		Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			30.00												
	Name of Employer	Occupation	1	_	Memo Item												
	LHC Group	State Opera	ation Director	P	Payroll Deduction (\$30 Bi-Weekly)												
	Receipt For:	Aggregate	Year-to-Date ▼		7												
	Primary General Other (specify) v	33 - 3	420.00	11													
	Full Name (Last, First, Middle Initial)			-													
C.	Lessley Fontenot				Date o	f Re	ceipt										
	Mailing Address 2303 sandalwood Drive				м м 06	/	D 03		2016	Y							
	City	State	Zip Code		Tran	sacti	ion ID	: SA11AI	.18071								
	Lafayette	LA	70570		Amoun	t of	Each F	Receipt th	nis Perioo	d							
	FEC ID number of contributing federal political committee.	С					,	5		.00							
	Name of Employer	Occupation	1		Memo Item												
	LHC Group	Area Sales	Manager	F	Payroll	Dedu	uction (	\$25 Bi-W	eekly)								
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General Other (specify) ▼		300.00	1													
s	UBTOTAL of Receipts This Page (optional)			 ▶			7	- 7	85	.00							

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

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## 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)

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14

			Detailed Summary Page		< 11a 13	$\left  \right $	_	11b	11c		2 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the				for th		urpc	ose of	soliciting	g cont	ributi	ons	
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROU												
Α.	Full Name (Last, First, Middle Initial) Jules Galiouras				Date	of F	Rece	eipt					
	Mailing Address 804 Woodmont Dr.		7.0.1		M 06		/	0 D D D D	L	201		Ŷ	
	City Convington	State LA	Zip Code 70433	-					SA11AI. eceipt th				
	FEC ID number of contributing federal political committee.	С					01 E		eceipt ti		20.0	0	
	Name of Employer LHC Group	Occupation DVP					o Ite duc		20 Bi-W	eekly)			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00										
в.	Full Name (Last, First, Middle Initial) Mary Gray Mailing Address 1528 Greenwick Circle				Date		Rece	eipt	<i>( ) Y</i>	V	Y		
	City	State	Zip Code		06 03 2016 Transaction ID : SA11AI.18076								
	Birmingham,	AL	35226		Amou	nt o	of E	ach R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С			30.00								
	Name of Employer LHC Group	Occupation State Opera	tion Director	F			no Ite educi		30 Bi-We	ekly)			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00										
c.	Full Name (Last, First, Middle Initial) Richard Hollier				Date	of F	Rece	eipt					
	Mailing Address P.O. Box 95				м 06		/	D D 03	JL	201		Y	
	City Opleousas	State LA	Zip Code 70571	_					SA11AI eceipt th				
	FEC ID number of contributing federal political committee.	С					,		7		40.0	0	
	Name of Employer	Occupation					no lte educ		40 Bi-W	eekly)			
	Louisiana Health Care Group, I Receipt For:	Legal Comp		_ '	ayron	00	5000	ιοn (φ		cony)			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00										
s	UBTOTAL of Receipts This Page (optional)		•••••				y		- 7	-	90.00	)	

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# SCHEDULE A (FEC Form 3X)

## Use separate schedule(s)

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(c	heck only	y on	e)								
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b	11c		12					
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any po	ersor	13 1 for the	purp	14 ose of	15 solicitin	g co	16 Intributi	ons	17			
	NAME OF COMMITTEE (In Full)			9 10 8			utions	nom suc			e.				
$\rangle$	LOUISIANA HEALTH CARE GRO	UP EMPL	OYEE FEDERAL POLI	TIC	AL AC	TIC	ON C	OMMI	TTE	EE IN	1C				
Α.	Full Name (Last, First, Middle Initial) Melanie Kuehn				Date of	Re	ceipt								
	Mailing Address 4205 Persimmon Way			06 03 2016 Transaction ID : SA11AI.18083											
	City	State	Zip Code												
	Lake Charles	LA	70518		Amount	of	Each F	Receipt t	his F	Period					
FEC ID number of contributing federal political committee.							,			50.0	0				
	Name of Employer	Occupation				mo lt				,					
	LHC Group	DVP			Payroll D	eau	ction (\$	50 BI-W	еекі	y)					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify) ▼		600.00												
В.	Full Name (Last, First, Middle Initial) Amy Laing				Date of	Re	ceipt								
	Mailing Address 238 Dogwood Springs Lane				06	/	03			016	Y				
	City	State	Zip Code 71953		Trans	actio	on ID :	SA11AI	.180	80					
	Mena	AR	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			40.00										
	Name of Employer	Occupation				mo li			la a kılı						
	LHC Group	State Marke	t Developer		Payroll D	eau	ction (\$	540 BI-W	еекіу	<i>¥</i> )					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00												
С.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt								
	Mailing Address 5908 John Boudreaux Road,				м м 06	/	03			016	Y				
	City	State	Zip Code		Trans	acti	on ID :	SA11A	1.180	65					
	Abbeville	LA	70510		Amount	of	Each F	Receipt t	his F	<sup>•</sup> eriod					
	FEC ID number of contributing federal political committee.	С					,		_	20.0	0				
	Name of Employer	Occupation			Payroll E	mo li Vodu			lookl	(v)					
	LHC Group	PT			Fayion	Jeuu		¢∠∪ DI-VV	CERI	у)					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_											
	Other (specify) ▼		240.00												
s	UBTOTAL of Receipts This Page (optional)			► _			7	7		110.0	0				
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TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

## Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)									
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GRO	UP EMPL	OYEE FEDERAL POLI	TICAL ACTION COMMITTEE INC									
Α.	Full Name (Last, First, Middle Initial) Richard MacMillian			Date of Receipt									
	Mailing Address 324 Deer Park Trial			06 03 _ 2016 _									
	City Lafayette	State LA	Zip Code 70508	Transaction ID : SA11AI.18085									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer	Occupation		Memo Item     Payroll Deduction (\$190 Bi-Weekly)									
	LHC Group	Legal Coun	sel										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2280.00										
в.	Full Name (Last, First, Middle Initial) Brach Myers			Date of Receipt									
	Mailing Address 201 Worth Ave.			06 03 _2016 _									
	City	State	Zip Code	Transaction ID : SA11AI.18081									
		LA	70508	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		40.00									
	Name of Employer LHC Grooup	Occupation		Payroll Deduction (\$40 Bi-Weekly)									
	Receipt For:		ent of Strategic Partnershi Year-to-Date ▼										
	Primary General Other (specify) ▼		480.00										
<u>с</u> .	Full Name (Last, First, Middle Initial) Keith Myers			Date of Receipt									
	Mailing Address 211 Morning Mist			06 03 2016									
	City	State	Zip Code	Transaction ID : SA11AI.18082									
	Sunset	LA	70584	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer Occupat		Occupation		Memo Item     Payroll Deduction (\$40 Bi-Weekly)									
The LHC Group President/ Receipt For:													
	Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 480.00										
s	UBTOTAL of Receipts This Page (optional)			270.00									
T	OTAL This Period (last page this line number of	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)

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			Detailed Summary Page		(11a		11b	11c		12	<u> </u>				
Ar	ny information copied from such Reports and Sta	atements ma	y not be sold or used by any pe	erson	13 for the	pur	14 Dose of	15 soliciting	co	16 ntribut		17			
	for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROU	UP EMPL	OYEE FEDERAL POLI	TICA	AL AC	TIC	ON CO	DMMIT	TE	EE IN	۱C				
A.	Full Name (Last, First, Middle Initial) Sarah Myers				Date of	f Re	ceipt								
	Mailing Address 242 Murtha Street				м м 06	1	D D D	/ Y		) 016	Y				
	City	State	Zip Code		Transaction ID : SA11AI.18021										
	Alexandria	VA	22304		Amount	t of	Each R	eceipt thi	is P	eriod					
	FEC ID number of contributing federal political committee.	С					,	7		3000.0					
	Name of Employer	Occupation				mo l	tem								
	LHC Group	Lobbyist			onation	1									
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		3000.00												
В.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt								
	Mailing Address 440 Hwy 758				м м 06	/	03	/ Y		)16	Y				
	City	State	Zip Code		Trans	acti	on ID :	SA11AI.1	806	63					
	Eunice	LA	70535		Amount	t of	Each R	eceipt thi	is P	eriod					
	FEC ID number of contributing federal political committee.	С			19.24										
	Name of Employer	Occupation		_	Memo Item										
	LHC Group	PT		P	ayroll D	)edu	iction (\$	19.24 Bi-'	Wee	ekly)					
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General														
	Other (specify)		, 230.88												
C.	Full Name (Last, First, Middle Initial) Melisa Rittenberry				Date of	f Re	ceipt								
	Mailing Address 3341 Quail Run Ct				м м 06	/	03	/ Y		)16	Y				
	City Nashville	State TN	Zip Code 37214					SA11AI.							
			37214	-	Amount	t of	Each R	eceipt thi	is P	eriod					
	FEC ID number of contributing federal political committee.	С					·	7	_	20.0	0				
	Name of Employer	Occupation		┤,		mo l									
	LHC Group	Regional O	perations Directory		ayı Oli L	Jeal	JOHOH (\$	20 Bi-We	CKI	y)					
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		240.00												
s	UBTOTAL of Receipts This Page (optional)		•				9	- 1	į	3039.2	4	]			

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

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## SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	JP EMPLOYEE FEDERAL POLIT	TICAL ACTION COMMITTEE INC
Full Name (Last, First, Middle Initial) A. Albert Simien Mailing Address 111 Shadowbrook Lane City Youngsville FEC ID number of contributing federal political committee. Name of Employer	State Zip Code LA 70592 Occupation	Date of Receipt 06 03 2016 Transaction ID : SA11AI.18077 Amount of Each Receipt this Period 38.50 Memo Item Payroll Deduction (\$38.50 Bi-Weekly)
LGC Group Receipt For: Primary General Other (specify) ▼	Director of Purchasing Aggregate Year-to-Date ▼ 462.00	
Full Name (Last, First, Middle Initial)         Tami Stout         Mailing Address 1113 Fawn Run         City         Somerset,         FEC ID number of contributing federal political committee.         Name of Employer         LHC Group         Receipt For:         Primary       General         Other (specify) ▼	State       Zip Code         KY       92501         C       Occupation         State Market Development Dir.         Aggregate Year-to-Date ▼         240.00	Date of Receipt
Full Name (Last, First, Middle Initial)         Harold Taylor         Mailing Address 252 Purple Dawn Drive         City         Sunset         FEC ID number of contributing federal political committee.         Name of Employer         La. Home Care Group, Inc.         Receipt For:         Primary         General         Other (specify) ▼	State       Zip Code         LA       70584         C       C         Occupation       C         Director of Purchasing       Aggregate Year-to-Date ▼         Aggregate Year-to-Date ▼       462.00	Date of Receipt 06 03 2016 Transaction ID : SA11AI.18078 Amount of Each Receipt this Period 38.50 Memo Item Payroll Deduction (\$38.50 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	97.00

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

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

## Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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••			Detailed Summary Page		( 11a		11b	11c	12				
Ar	ny information copied from such Reports an	d Statements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	16 contribu	17 tions			
	for commercial purposes, other than using												
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE G	ROUP EMP	LOYEE FEDERAL POLI	TICA	AL AC	TI	ON CC	JMMIT	TEE I	NC			
Α.	Full Name (Last, First, Middle Initial) James Tobey				Date of	f Re	eceipt						
	Mailing Address 465 Leo Avenue				06 03 2016								
	City	State	Zip Code 71105		Trans	act	ion ID : S	SA11AI.1	8084				
	Shreveport	LA		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			50.00								
	Name of Employer	Occupation	1	┤,	Memo Item								
	LHC Group	Director of	Sales and Marketing	P	Payroll Deduction (\$50 Bi-Weekly)								
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		600.00										
в.	Full Name (Last, First, Middle Initial) Cynthia Wells				Date of	f Re	eceipt						
	Mailing Address 367 Adams Circle					/	03	/ Y	ү ү 2016	Y			
	City	State	Zip Code		Trans	acti	ion ID : S	SA11AI.1	8068				
	Crawfordsville	AR	72327		Amoun	t of	Each Re	eceipt thi	s Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		7		20.	00			
	Name of Employer LHC Groups	Occupation Hospice Re	P	Payroll Deduction (\$20 Bi-Weekly)									
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		240.00	1									
<u>с</u> .	Full Name (Last, First, Middle Initial) Christa Williams				Date of	f Re	eceipt						
	Mailing Address 1549 Camelot Dr,					06 03 2016							
	City	State KY	Zip Code 42420		Transaction ID : SA11AI.18069								
	Henderson	KI	42420	_	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			20.00								
	Name of Employer	Occupation		Armo Item     Payroll Deduction (\$20 Bi-Weekly)									
	LHC Group	RN		_  '		Jour		-0 0-116	Uniy)				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	1									
s	SUBTOTAL of Receipts This Page (optional	)	<u>, , , , , , , , , , , , , , , , , , , </u>	▲   ▶			5		90.4				
Iт	TOTAL This Period (last page this line num	per only)							3781.	24			

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

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SCHEDULE B (FEC Form 3X)			FOR LINE	E NUMBER: PAGE 13 OF 14					
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b						
		Detailed Summary Page	210	22         X         23         24         25         26           28a         28b         28c         29         30b					
	y information copied from such Reports and Staten for commercial purposes, other than using the nan								
$\left  \right\rangle$									
	LOUISIANA HEALTH CARE GROUP	EMPLOYEE FEDER		CAL ACTION COMMITTEE INC					
Α.	Full Name (Last, First, Middle Initial) FRIENDS OF SCOTT ANGELLE, I			Date of Disbursement					
				M M / D D / Y Y Y Y					
	Mailing Address P.O. BOX 1385			06 07 2016					
	City S BREAUX BRIDGE	State Zip Code LA 70517		Transaction ID : SB23.18006					
	Purpose of Disbursement								
	Donation		011	Amount of Each Disbursement this Period					
	Candidate Name		Category/ Type	1500.00					
		nent For: 2016		Memo Item					
	Senate X President	Primary General Other (specify)							
	State: LA District: 03	···· (- ··· <b>)</b> / •							
_	Full Name (Last, First, Middle Initial)								
в.	IMPACT SENATE 2016			Date of Disbursement					
	Mailing Address 918 PENNSYLVANIA AVE SE		06 / Y Y Y Y 2016						
	City	State Zip Code							
	WASHINGTON	DC 20003		Transaction ID : SB23.18008					
	Purpose of Disbursement Donation		011	Amount of Each Disbursement this Period					
	Candidate Name		Category/						
	0/// 0 0		Туре	5000.00					
	Office Sought: House Disburser	nent For: 2016 Primary X General		Memo Item					
	President	Other (specify)							
	State: District:								
C.	Full Name (Last, First, Middle Initial)			Date of Disbursement					
				M M / D D / Y Y Y Y					
	Mailing Address PO BOX 22447	06 30 2016							
	,	State Zip Code		Transaction ID : SB23.18010					
	PHILADELPHIA Purpose of Disbursement	PA 19110		-					
	Donation - IMPACT Senate 2016	011	Amount of Each Disbursement this Period						
	Candidate Name KATHLEEN ALANA MCGINTY		Category/	1666.67					
		nent For: 2016	Туре						
	Senate	Primary X General		X Memo Item					
	President	Other (specify) ▼							
	State: PA District: 00								
s	UBTOTAL of Disbursements This Page (optional)		••••••	6500.00					
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	<b>OTAL</b> This Period (last page this line number only)		🕨						

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ar for commercial puppese, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF CONMITTEE (IN DAMAGE FEEDERAL POLITICAL ACTION COMMITTEE INC Full Name (Last, First, Middle Initial) A. MAGGIE FOR NH Mailing Address PO BOX 298 City CONCORD NH Obsursement Concord NH OS302 City Concord NH			for each Detailec	n category of the d Summary Page		21b 27	22 X 2 28a 2	8b 28	3c 2	9 30	
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC         Full Name (Last, First, Middle Initial)         A. MAGGIE FOR NH         Mailing Address PO BOX 298         City         Concord         NH MORT Sende 2016         Condidate Name         Mailing Address         Office Sought:         Hubber State:         NH Mailing Address         Office Sought:         Historic         State:         NH Mailing Address         City         State:         NH Disbursement         B. STRICKLAND FOR SENATE         Mailing Address         Purpose of Disbursement         Disbursement         Mailing Address         Office Sought:         Hubber Disbursement         Disbursement         Mailing Address         Office Sought:         Purpose of Disbursement         Disbursement         Disbursement         Disbursement         Disbursement         Mailing Address         Office Sought:         Hubber Disbursement         Disbursement         Disbursement         Disbursement<											
✓       Full Name (Last, First, Middle Initial)         A. MAGGIE FOR NH       Date of Disbursement         Mailing Address PO BOX 298       06         City CONCORD       NH       03302         Purpose of Disbursement Donaton - MPACT Senate 2016       011         Candidate Name       Disbursement For: 2016       011         Condidate Name       Disbursement For: 2016       Memo Item         Person of Disbursement       Disbursement For: 2016       Memo Item         Path Name (Last, First, Middle Initial)       B       STRICKLAND FOR SENATE       Date of Disbursement         Mailing Address       PO BOX 2196       011       Other (specify) ▼       Tensection ID : SB23.18016         City       State: NH       Disbursement For: 2016       011       Other (specify) ▼       Tensection ID : SB23.18016         Runnut of Each Disbursement For: 2016       011       Other (specify) ▼       Tensection ID : SB23.18016         Purpose of Disbursement       Primary       Ceneral       011       Other (specify) ▼         Other Sought:       House       Disbursement For: 2016       Other (specify) ▼       Tensection ID : SB23.18016         Amount of Each Disbursement       Other (specify) ▼       General       011       Other Sought       Memo Item         Pur	$\setminus$										
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Mailing Address         City       State       Zip Code         Purpose of Disbursement		TED STRICKLAND         Office Sought:       House       Disburser         X       Senate       President         State:       OH       District:       00	Primary	X General		•	× Memo Iter	n			
Purpose of Disbursement   Candidate Name   Candidate Name   Office Sought:   House   Disbursement For:   Senate   Primary   General   Other (specify)    Subtrotal of Disbursements This Page (optional)	С.	TED STRICKLAND         Office Sought:       House       Disburser         X       Senate       President         State:       OH       District:       00	Primary	X General		<u> </u>					
Candidate Name   Candidate Name   Office Sought:   House   Disbursement For:   Senate   President   Other (specify)	 C.	TED STRICKLAND         Office Sought:       House       Disburser         Senate       President       Image: Colspan="2">Image: Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2"Colspa	Primary	X General		· · · · · · · · · · · · · · · · · · ·	Date of Disb	ursement	,	Y Y	
Candidate Name Category/ Type   Office Sought: House   Senate Primary   President Other (specify)   State: District:    SUBTOTAL of Disbursements This Page (optional)	 C.	TED STRICKLAND         Office Sought:       House       Disburser         Senate       President         State:       OH       District:       00         Full Name (Last, First, Middle Initial)         Mailing Address	Primary Other (sp	⊠ General ecify) ▼			Date of Disb	ursement	,	Y Y Y	
Office Sought:       House       Disbursement For:         Senate       Primary       General         President       Other (specify)       ●         State:       Disbursements This Page (optional)	C.	TED STRICKLAND         Office Sought:       House       Disburser         Senate       President         State:       OH       District:       00         Full Name (Last, First, Middle Initial)         Mailing Address         City	Primary Other (sp	⊠ General ecify) ▼			Date of Disb	ursement	,	Y Y	
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TOTAL This Period (last page this line number only) 6500.00	 c.	TED STRICKLAND         Office Sought:       House       Disburser         Senate       President         State:       OH       District:       00         Full Name (Last, First, Middle Initial)         Mailing Address         City         Purpose of Disbursement         Candidate Name         Office Sought:       House       Disburser         Senate       President       Disburser	Primary Other (sp State ment For: Primary	Code	Type	ry/	Date of Disb	ursement	Y Y sement th	nis Period	
	Г	TED STRICKLAND         Office Sought:       House       Disburser         Senate       President       Image: Senate         President       Image: Senate       Image: Senate         State:       OH       District:       00         Full Name (Last, First, Middle Initial)       Image: Senate       Image: Senate         Mailing Address       Image: Senate       Image: Senate       Image: Senate         Office Sought:       House       Disburser         Office Sought:       House       Disburser         Senate       Image: Senate       Image: Senate         President       Image: Senate       Image: Senate         State:       District:       Image: Senate       Image: Senate         Office Sought:       Image: Senate       Image: Senate       Image: Senate         State:       District:       Image: Senate       Image: Senate       Image: Senate         Image: State:       District:       Image: Senate       Image: Sen	Primary Other (sp State ment For: Primary Other (sp	Ceneral ecify) ▼ Zip Code	Type	ry/	Date of Disb	ursement	Y Y sement th	nis Period	