

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Albert Simien

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="1061.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26918.28"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3038.36"/>	<input type="text" value="31645.46"/>
(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="29956.64"/>	<input type="text" value="32706.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5000.00"/>	<input type="text" value="7750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24956.64"/>	<input type="text" value="24956.64"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2452.48	20066.69
(ii) Unitemized	585.88	11578.77
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3038.36	31645.46
(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)	3038.36	31645.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3038.36	31645.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3038.36	31645.46

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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.....	5000.00	7750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5000.00	7750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	7750.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3038.36	31645.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3038.36	31645.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Jeffrey Barr
 Full Name (Last, First, Middle Initial)
 Mailing Address 12370 Beragio Place
 City Alpharetta State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Market Development Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **380.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : SA11AI.15218
 Amount of Each Receipt this Period **200.00**
 Payroll deduction (\$20 Bi-Weekly)

B. Jeffrey Barr
 Full Name (Last, First, Middle Initial)
 Mailing Address 12370 Beragio Place
 City Alpharetta State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Market Development Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **09 / 22 / 2014**
Transaction ID : SA11AI.15219
 Amount of Each Receipt this Period **200.00**
 Payroll deduction (\$20 Bi-Weekly)

C. Pam Bridges
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 Ormandy Drive
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Louisiana Health Care Group, I Occupation Corporate Trainer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **570.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : SA11AI.15236
 Amount of Each Receipt this Period **30.00**
 Payroll deduction (\$30 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 7 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Pam Bridges
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 Ormandy Drive
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Louisiana Health Care Group, I Occupation Corporate Trainer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 22 / 2014**
Transaction ID : SA11AI.15237
 Amount of Each Receipt this Period **30.00**
 Payroll deduction (\$30 Bi-Weekly)

B. Chris Duhon
 Full Name (Last, First, Middle Initial)
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **570.00**

Date of Receipt **09 / 11 / 2014**
Transaction ID : SA11AI.15238
 Amount of Each Receipt this Period **30.00**
 Payroll deduction (\$30 Bi-Weekly)

C. Chris Duhon
 Full Name (Last, First, Middle Initial)
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **09 / 22 / 2014**
Transaction ID : SA11AI.15239
 Amount of Each Receipt this Period **30.00**
 Payroll deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Ronda Dupree		Date of Receipt
Mailing Address 130 Hwy 132		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Delhi	LA	71232
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.15240
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll deduction (\$30 Bi-Weekly)
LHC Group	State Operation Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="570.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ronda Dupree		Date of Receipt
Mailing Address 130 Hwy 132		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Delhi	LA	71232
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.15241
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll deduction (\$30 Bi-Weekly)
LHC Group	State Operation Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lessley Fontenot		Date of Receipt
Mailing Address 2303 sandalwood Drive		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lafayette	LA	70570
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.15186
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	Payroll deduction (\$25 Bi-Weekly)
LHC Group	Area Sales Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Lessley Fontenot		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15187
Mailing Address 2303 sandalwood Drive		Amount of Each Receipt this Period 25.00
City Lafayette	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C		Payroll deduction (\$25 Bi-Weekly)
Name of Employer LHC Group	Occupation Area Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) B. Barbara Goodman		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : SA11AI.15254
Mailing Address 420 W. Pinhook Road		Amount of Each Receipt this Period 15.00
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C		Payroll deduction (\$15 Bi-Weekly)
Name of Employer LHC Group	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) C. Barbara Goodman		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15255
Mailing Address 420 W. Pinhook Road		Amount of Each Receipt this Period 15.00
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C		Payroll deduction (\$15 Bi-Weekly)
Name of Employer LHC Group	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Mary Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 11 / 2014
Transaction ID : SA11Al.15242
 Amount of Each Receipt this Period 30.00
 Payroll deduction (\$30 Bi-Weekly)

B. Mary Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 22 / 2014
Transaction ID : SA11Al.15243
 Amount of Each Receipt this Period 30.00
 Payroll deduction (\$30 Bi-Weekly)

C. Richard Hollier
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 95
 City Opleousas, State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 11 / 2014
Transaction ID : SA11Al.15314
 Amount of Each Receipt this Period 40.00
 Payroll deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Richard Hollier
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas State LA Zip Code 70571

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

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **09 / 22 / 2014**

Transaction ID : SA11AI.15315

Amount of Each Receipt this Period **400.00**

Payroll deduction (\$40 Bi-Weekly)

B. Jeffrey Kreger
Full Name (Last, First, Middle Initial)

Mailing Address 100 Creek Bnd

City Lafayette State LA Zip Code 70508

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

Name of Employer LHC Group Occupation Sr. VP of Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3800.00**

Date of Receipt **09 / 11 / 2014**

Transaction ID : SA11AI.15222

Amount of Each Receipt this Period **200.00**

Payroll deduction (\$200 Bi-Weekly)

C. Jeffrey Kreger
Full Name (Last, First, Middle Initial)

Mailing Address 100 Creek Bnd

City Lafayette State LA Zip Code 70508

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

Name of Employer LHC Group Occupation Sr. VP of Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4000.00**

Date of Receipt **09 / 22 / 2014**

Transaction ID : SA11AI.15223

Amount of Each Receipt this Period **200.00**

Payroll deduction (\$200 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	440.00
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 12 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Melanie Kuehn		Date of Receipt
Mailing Address 4205 Persimmon Way		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lake Charles	LA	70518
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.15258
LHC Group	DVP	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="950.00"/>	<input type="text" value="50.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Melanie Kuehn		Date of Receipt
Mailing Address 4205 Persimmon Way		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lake Charles	LA	70518
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.15259
LHC Group	DVP	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	<input type="text" value="50.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Amy Laing		Date of Receipt
Mailing Address 238 Dogwood Springs Lane		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Mena	AR	71953
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.15316
LHC Group	State Market Developer	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="760.00"/>	<input type="text" value="40.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Amy Laing		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15317
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 40.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
		Payroll deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Ryan Latiolais		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : SA11AI.15224
Mailing Address 1215 Gendarme Rd		Amount of Each Receipt this Period 20.00
City Carencro	State LA	Zip Code 70520
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Director of Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	
		Payroll deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ryan Latiolais		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15225
Mailing Address 1215 Gendarme Rd		Amount of Each Receipt this Period 20.00
City Carencro	State LA	Zip Code 70520
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Director of Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
		Payroll deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Errol Leblanc
Full Name (Last, First, Middle Initial)

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

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

Name of Employer LHC Group Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
09 / 11 / 2014
Transaction ID : **SA11AI.15226**

Amount of Each Receipt this Period
200.00

Payroll deduction (\$20 Bi-Weekly)

B. Errol Leblanc
Full Name (Last, First, Middle Initial)

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

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

Name of Employer LHC Group Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
09 / 22 / 2014
Transaction ID : **SA11AI.15227**

Amount of Each Receipt this Period
200.00

Payroll deduction (\$20 Bi-Weekly)

C. Richard MacMillian
Full Name (Last, First, Middle Initial)

Mailing Address 324 Deer Park Trial
City Lafayette State LA Zip Code 70508

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

Name of Employer LHC Group Occupation Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3420.00**

Date of Receipt
09 / 11 / 2014
Transaction ID : **SA11AI.15298**

Amount of Each Receipt this Period
190.00

Payroll deduction (\$190 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **230.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Richard MacMillian		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15299
Mailing Address 324 Deer Park Trail		Amount of Each Receipt this Period 190.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Payroll deduction (\$190 Bi-Weekly)	
Name of Employer LHC Group	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3610.00	

Full Name (Last, First, Middle Initial) B. Rebecca McCoy		Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : SA11AI.15244
Mailing Address 57 Short Side Drive		Amount of Each Receipt this Period 30.00
City Williamstown	State WV	Zip Code 26187
FEC ID number of contributing federal political committee. C	Payroll deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Operations Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

Full Name (Last, First, Middle Initial) C. Rebecca McCoy		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15245
Mailing Address 57 Short Side Drive		Amount of Each Receipt this Period 30.00
City Williamstown	State WV	Zip Code 26187
FEC ID number of contributing federal political committee. C	Payroll deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Operations Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Brach Myers
 Mailing Address 201 Worth Ave.
 City State Zip Code
 Lafayette LA 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group Vice President of Strategic Partnershi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11Al.15318
 Amount of Each Receipt this Period
 40.00
 Payroll deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Brach Myers
 Mailing Address 201 Worth Ave.
 City State Zip Code
 Lafayette LA 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group Vice President of Strategic Partnershi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11Al.15319
 Amount of Each Receipt this Period
 40.00
 Payroll deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Keith Myers
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11Al.15320
 Amount of Each Receipt this Period
 40.00
 Payroll deduction (\$40 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 17 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Keith Myers

Mailing Address 211 Morning Mist

City State Zip Code
 Sunset LA 70584

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

Name of Employer Occupation
 The LHC Group President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 09 / 22 / 2014
Transaction ID : SA11AI.15321

Amount of Each Receipt this Period
 40.00

Payroll deduction (\$40 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Cathy Newhouse

Mailing Address 97 Stonehill Road

City State Zip Code
 Lafayette LA 70508

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

Name of Employer Occupation
 LHC Group Sr. VP of Clinical Program Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 950.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : SA11AI.15264

Amount of Each Receipt this Period
 50.00

Payroll deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Cathy Newhouse

Mailing Address 97 Stonehill Road

City State Zip Code
 Lafayette LA 70508

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

Name of Employer Occupation
 LHC Group Sr. VP of Clinical Program Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 22 / 2014
Transaction ID : SA11AI.15265

Amount of Each Receipt this Period
 50.00

Payroll deduction (\$50 Bi-Weekly)

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 18 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Ted Pappas
Full Name (Last, First, Middle Initial)

Mailing Address 440 Hwy 758

City Eunice State LA Zip Code 70535

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

Name of Employer LHC Group Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.56**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.15304

Amount of Each Receipt this Period
19.24

Payroll deduction (\$19.24 Bi-Weekly)

B. Ted Pappas
Full Name (Last, First, Middle Initial)

Mailing Address 440 Hwy 758

City Eunice State LA Zip Code 70535

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

Name of Employer LHC Group Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.15305

Amount of Each Receipt this Period
19.24

Payroll deduction (\$19.24 Bi-Weekly)

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

Mailing Address 3341 Quail Run Ct

City Nashville State TN Zip Code 37214

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

Name of Employer LHC Group Occupation Regional Operations Directory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.15228

Amount of Each Receipt this Period
20.00

Payroll deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **58.48**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Melisa Rittenberry
 Full Name (Last, First, Middle Initial)
 Mailing Address 3341 Quail Run Ct
 City Nashville State TN Zip Code 37214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation Regional Operations Directory
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **09 / 22 / 2014**
Transaction ID : SA11AI.15229
 Amount of Each Receipt this Period **20.00**
 Payroll deduction (\$20 Bi-Weekly)

B. Albert Simien
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LGC Group Occupation Director of Purchasing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **731.50**

Date of Receipt **09 / 11 / 2014**
Transaction ID : SA11AI.15246
 Amount of Each Receipt this Period **38.50**
 Payroll deduction (\$38.50 Bi-Weekly)

C. Albert Simien
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LGC Group Occupation Director of Purchasing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **770.00**

Date of Receipt **09 / 22 / 2014**
Transaction ID : SA11AI.15247
 Amount of Each Receipt this Period **38.50**
 Payroll deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	97.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

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

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.15230

Amount of Each Receipt this Period
20.00

Payroll deduction (\$20 Bi-Weekly)

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

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

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

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.15231

Amount of Each Receipt this Period
20.00

Payroll deduction (\$20 Bi-Weekly)

C. Harold Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 252 Purple Dawn Drive

City Sunset, State LA Zip Code 70584

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

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **731.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.15248

Amount of Each Receipt this Period
38.50

Payroll deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	78.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Harold Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 252 Purple Dawn Drive
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 La. Home Care Group, Inc. Director of Purchasing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 770.00

Date of Receipt
 09 / 22 / 2014
Transaction ID : SA11AI.15249
 Amount of Each Receipt this Period
 38.50
 Payroll deduction (\$38.50 Bi-Weekly)

B. Gary Thietten
 Full Name (Last, First, Middle Initial)
 Mailing Address 10611 Pine Shadow Road
 City State Zip Code
 South Jordan UT 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group VP of Corp. Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1900.00

Date of Receipt
 09 / 11 / 2014
Transaction ID : SA11AI.15312
 Amount of Each Receipt this Period
 100.00
 Payroll deduction (\$100 Bi-Weekly)

C. Gary Thietten
 Full Name (Last, First, Middle Initial)
 Mailing Address 10611 Pine Shadow Road
 City State Zip Code
 South Jordan UT 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group VP of Corp. Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 09 / 22 / 2014
Transaction ID : SA11AI.15313
 Amount of Each Receipt this Period
 100.00
 Payroll deduction (\$100 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	238.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. James Tobey			Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : SA11AI.15266
Mailing Address 465 Leo Avenue			Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105	Payroll deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group		Aggregate Year-to-Date ▼ 950.00
Occupation Director of Sales and Marketing		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. James Tobey			Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.15267
Mailing Address 465 Leo Avenue			Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105	Payroll deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group		Aggregate Year-to-Date ▼ 1000.00
Occupation Director of Sales and Marketing		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cynthia Wells			Date of Receipt MM / DD / YYYY 09 / 11 / 2014 Transaction ID : SA11AI.15232
Mailing Address 367 Adams Circle			Amount of Each Receipt this Period 20.00
City Crawfordsville	State AR	Zip Code 72327	Payroll deduction (\$20 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Groups		Aggregate Year-to-Date ▼ 380.00
Occupation Hospice Regional Operations Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 24
	(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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial) A. Cynthia Wells		Date of Receipt
Mailing Address 367 Adams Circle		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Crawfordsville	AR	72327
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
LHC Groups	Hospice Regional Operations Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
		Payroll deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Christa Williams		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Henderson	KY	42420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
LHC Group	RN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
		Payroll deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Christa Williams		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Henderson	KY	42420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
LHC Group	RN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
		Payroll deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="2452.48"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Mailing Address 425 SECOND STREET NE

Transaction ID : SB23.15323

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Donation

012
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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

5000.00
