FEC FORM 3X	AN	ID DIS	BURSE	CEIPTS MENTS rized Comm	\$		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILIN		Example:If typ over the lines	ing, type			
								· · · · ·]
ADDRESS (number and	street)	20 W. Pinhooł └──└──└──└ uite A	Road					
Check if differ than previously reported. (ACC	ent L				<u> </u>		70503	
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY	A,	ç	STATE	ZIPCOD)e 🔺
C00382796	• • • •		3. IS T REF	HIS PORT X	NEW (N) OR	AME (A)	ENDED	
4. TYPE OF REPO (Choose One) (a) Quarterly Rep		(b) Monthly Report Due On:	Feb 20		May 20 (M5) Jun 20 (M6)		0 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
	Report(Q1)	(c) 12-Da	Apr 20	(M4) Primary (1	Jul 20 (M7)	Oct 20 General (12	2G)	Jan 31 (YE) Runoff (12R)
Quarterly October	July 15 Quarterly Report(Q2) October 15 Quarterly Report(Q3)		PRE -Election Report for the:		on (12C)	Special (12G)		
January 3 Quarterly	81 Report(YE)		Election of	n			in the State of	f
Year Only	on-election /) (MY)		ay -Election rt for the:	General (30G)	Runoff (30	R)	Special (30S)
(TER)	on Report		Election	on			in the State of	F
5. Covering Period	07	01	2008	throug	h 07	31	2008	
I certify that I have exam Type or Print Name of T		t and to the be Jimmy Gravois		edge and belief i	t is true, correct a	and complete.		
Signature of Treasurer		-	mmy Gravois		D	ate 08	20	2008
NOTE : Submission of f	alse, erroneous	, or incomplete	e information m	ay subject the p	erson signing this	s Report to the p	enalties of 2 U.S	S.C 437g.
Office Use Only							FEC FORI (Rev. 12/200	

Image# 28932511861

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:	0 1 0 1	To: 07 0 1 0 0 8
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1		2354.97
	(b) Cash on Hand at Begining of Reporting Period	2154.97	
	(c) Total Receipts (from Line 19)	975.00	11075.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3129.97	13429.97
7.	Total Disbursements (from Line 31)	2028.64	12328.64
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1101.33	1101.33
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC 0^D1 м м 07 ^м м 07 [⊅]1 D D 2008 2008 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 8795.00 492.00 (i) Itemized (use Schedule A) 483.00 2280.00 (ii) Unitemized (iii) TOTAL (add 975.00 11075.00 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 975.00 11075.00 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), 975.00 11075.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 975.00 11075.00 (subtract Line 18(c) from Line 19)

Image# 28932511863

DETAILED SUMMARY PAGE

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared 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
20	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	2000.00	12300.00
	Independent Expenditure (use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
_0.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
_0.	(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	28.64	28.64
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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))	2028.64	12328.64
32.	Total Federal Disbursements		
02.			

Image# 28932511864

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	975.00	11075.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	975.00	11075.00
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

FE6AN026

or or commercial purposes, other than using the name and address of any political committee to solid cointributions from such committee. NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC Full Name (Last, First, Middle Initial) Maing Address 134 Plantation Drive City State Name of Engloyer Date of Receipt Name of Engloyer Occupation Director of Nursing Director of Nursing Maing Address 134 Plantation Drive B. Marg Address 134 Plantation Drive City State Zip Code Name of Engloyer Director of Nursing Director of Nursing B. Marg Address 134 Plantation Drive State City State Zip Code Nament of Engloyer Name of Engloyer Aggregate Year-to-Date V Transaction ID: SA11AL:5624 New Iberia LA 7663 Zip Code New Iberia <th>l</th> <th>SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS</th> <th></th> <th></th> <th></th>	l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS			
A. May Benutieu Date of Receipt Mailing Address 134 Plantation Drive 0.7 0.8 2.0.0.8 City State Zip Code Transaction Di: SA11AL5596 New Iboria LA 70563 Preceipt For: 20.00 Bit Medical committies C Bit Weekly Payroll Deduction (\$20.00) Bit Weekly Payroll Deduction (\$20.00) Bit May Benutieu Date of Receipt Date of Receipt Date of Receipt Proceipt For: Director of Nursing Date of Receipt Date of Receipt Proceipt For: Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Mailing Address 134 Plantation Drive C Transaction ID: SA11AL5624 Mew Iberia LA 70563 Transaction ID: SA11AL5624 Name of Employeer Cocupation Date of Receipt Date of Receipt City State Zip Code Transaction ID: SA11AL5624 Amount of Employeer Date of Receipt Date of Receipt Date of Receipt City State Zip Code Transaction ID: SA11AL5624 Amount of Each Receipt ID eduction Name of Employeer <td< th=""><th></th><th>NAME OF COMMITTEE (In Full)</th><th></th><th></th><th></th></td<>		NAME OF COMMITTEE (In Full)			
B. Mary Beaulieu Date of Receipt Mailing Address 134 Plantation Drive Date of Receipt City State Zip Code New Iberia LA 70563 FEC ID number of contributing rederal political committee. C Primary Name of Employee Louisiana Health Care Gro- up.1 Occupation Director of Nursing Bi-Weekly Payroll Deducti- on (\$20.00) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt City State Zip Code Transaction ID: SA11AL.5601 Lassley Fontenct Aggregate Year-to-Date ▼ Date of Receipt City State Zip Code Transaction ID: SA11AL.5601 Lafayette LA 70570 Transaction ID: SA11AL.5601 Receipt For: Occupation Area Sales Manager Aggregate Year-to-Date ▼ Bi-Weekly Payroll Deducti- on (\$25.00) Bi-Weekly Payroll Deducti- Aggregate Year-to-Date ▼ Mount of Each Receipt this Period E5.00 Bi-Weekly Payroll Deducti- Aggregate Year-to-Date ▼ Mount of Each Receipt this Period E5.00 Bi-Weekly Payroll Deducti- Aggregate Year-to-Date ▼ Mount of Each Receipt	A.	Mary Beaullieu Mailing Address 134 Plantation Drive City New Iberia FEC ID number of contributing federal political committee. Name of Employer Louisiana Health Care Gro-up, I Receipt For: Primary General	LA C Occupation Director	70563 on of Nursing e Year-to-Date ▼	M M M D D P Y
C. Lessley Fontenot Date of Receipt Mailing Address 2303 sandalwood Drive 07 08 2008 City State Zip Code Transaction ID: SA11AL5601 Lafayette LA 70570 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 25.00 Name of Employer Occupation Area Sales Manager HC Group Aggregate Year-to-Date ▼ General Other (specify) ▼ 475.00 65.00	– B.	Mary Beaullieu Mailing Address 134 Plantation Drive City New Iberia FEC ID number of contributing federal political committee. Name of Employer Louisiana Health Care Gro-up, I Receipt For: Primary General	LA C Occupation Director	70563 on of Nursing e Year-to-Date ▼	M M M D D Y
	 C.	Lessley Fontenot Mailing Address 2303 sandalwood Drive City	State LA C Occupatio Area Sal	70570 on les Manager e Year-to-Date ▼	M M O D D Y
TOTAL This Period (last page this line number only)	F				65.00

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ę	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 12			
	TEMIZED RECEIPTS		for each category of the	(check only one)			
	I EIVIIZED RECEIPIS		Detailed Summary Page	X 11a 11b 11c 12			
Г				13 14 15 16 17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions			
	> LOUISIANA HEALTH CARE GROUP	EIVIPLOYEE	FEDERAL POLITICAL ACT				
A.	Full Name (Last, First, Middle Initial) Lessley Fontenot	Date of Receipt					
	Mailing Address 2303 sandalwood Driv	е		M M / D D / Y Y Y Y Y 07 17 2008			
	City	State	Zip Code	Transaction ID: SA11AI.5629			
	Lafayette	LA	70570	Amount of Each Receipt this Period			
	FEC ID number of contributing	C		25.00			
	federal political committee.	С		23.00			
	Name of Employer	Occupatio	on	Bi-Weekly Payroll Deducti-			
	LHC Group		les Manager	on (\$25.00)			
	Receipt For:	1 1	e Year-to-Date V	1			
	Primary General			1			
	Other (specify) 🔻	0 0	500.00				
_							
в.	Full Name (Last, First, Middle Initial) Barbara Goodman			Date of Receipt			
Б.	Mailing Address 420 W. Pinhook Road						
	Maning Address 420 W. FILLIOK HOad			07 17 2008			
	City	State	Zip Code	Transaction ID: SA11AI.5631			
	Lafayette	LA	70503	Amount of Each Receipt this Period			
	FEC ID number of contributing			15.00			
	federal political committee.	С		15.00			
	Name of Employer	Occupatio	ממ	Bi-Weekly Payroll Deducti- on (\$15.00)			
	Name of Employer LHC Group		l Manager				
	Receipt For:	, , , , , , , , , , , , , , , , , , ,	e Year-to-Date V	_			
	Primary General	, iggi ogu		1			
	Other (specify)	0 0	215.00				
_				-			
~	Full Name (Last, First, Middle Initial)			Date of Dessint			
C.	John Indest Mailing Address 235 Duperier Ave.			Date of Receipt			
	Maining Address 235 Duperter Ave.			07 08 2008			
	City	State	Zip Code	Transaction ID: SA11AI.5604			
	New Iberia	LA	70563	Amount of Each Receipt this Period			
	FEC ID number of contributing			40.00			
	federal political committee.	C		40.00			
	Name of Employer	Occupatio	าก	Bi-Weekly Payroll Deducti-			
	The LHC Group	VP/COC		on (\$40.00)			
	Receipt For:		e Year-to-Date 🔻	_			
	Primary General			1			
	Other (specify) 🔻		760.00]]			
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ſ				00.00			
	SUBTOTAL of Receipts This Page (optional)		······	80.00			
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	TOTAL This Period (last page this line number	only)					

				FOR LINE NUMBER: PAGE 8/12			
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)			
	TEMIZED 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 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 E						
Α.	Full Name (Last, First, Middle Initial) John Indest	Date of Receipt					
	Mailing Address 235 Duperier Ave.	07 / 17 / Y Y Y Y 08					
	City	State	Zip Code	Transaction ID: SA11AI.5632			
	New Iberia	LA	70563	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.00			
	Name of Employer The LHC Group	Occupation VP/COC		Bi-Weekly Payroll Deducti- on (\$40.00)			
	Receipt For:		e Year-to-Date 🔻	1			
	Primary General Other (specify)		800.00	1			
		0 0	0 0 0 0 0 0 0 0				
- В.	Full Name (Last, First, Middle Initial) Carllene MacMilliah			Date of Receipt			
	Mailing Address 420 W. Pinhook Ave.			07 / 08 / Y Y Y Y 02008			
	City	State	Zip Code	Transaction ID: SA11AI.5607			
	Lafayette	LA	70503	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer LHC Group	Occupatio		 Bi-Weekly Payroll Deducti- on (\$25.00) 			
		1	of Hospice	_			
	Receipt For: Primary General	Aggregate	e Year-to-Date				
	Other (specify) ▼		225.00				
- C.	Full Name (Last, First, Middle Initial) Carllene MacMilliah			Date of Receipt			
0.	Mailing Address 420 W. Pinhook Ave.			07 17 2008			
	City	State	Zip Code	Transaction ID: SA11AI.5634			
	Lafayette	LA	70503	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer LHC Group	Occupation Director	on of Hospice	Bi-Weekly Payroll Deducti- on (\$25.00)			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	250.00]			
ſ				90.00			
ļ	SUBTOTAL of Receipts This Page (optional)			-			
	TOTAL This Period (last page this line number of	only)					

l	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 12 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP	solicit contributions from such committee.				
∠ A.	Full Name (Last, First, Middle Initial) Richard MacMillian Mailing Address 324 Deer Park Trial	Date of Receipt				
	City	State	Zip Code	0 7 0 8 2 0 0 8 Transaction ID: SA11AI.5608		
	Lafavette	LA	70508	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer LHC Group	Occupatio Legal Co		Bi-Weekly Payroll Deducti- on (\$50.00)		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 850.00]		
- В.	Full Name (Last, First, Middle Initial) Richard MacMillian			Date of Receipt		
	Mailing Address 324 Deer Park Trial			07 17 2008		
	City State		Zip Code	Transaction ID: SA11AI.5635		
	Lafayette	LA	70508	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer LHC Group	Occupatio Legal Co		 Bi-Weekly Payroll Deducti- on (\$50.00) 		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 900.00]		
с. –	Full Name (Last, First, Middle Initial) Keith Myers			Date of Receipt		
	Mailing Address 211 Morning Mist			07 / 08 / Y Y Y Y 007		
	City Sunset	State LA	Zip Code	Transaction ID: SA11AI.5610		
	FEC ID number of contributing federal political committee.	C	70584	Amount of Each Receipt this Period 40.00		
	Name of Employer Occupat The LHC Group Preside			 Bi-Weekly Payroll Deducti- on (\$40.00) 		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date V 2740.00]		
	SUBTOTAL of Receipts This Page (optional)			140.00		
F	TOTAL This Period (last page this line number	r 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 / 12 (check only one) X X 11a 11b 11c			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n						
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP EI	ION COMMITTEE INC					
Α.	Full Name (Last, First, Middle Initial) Keith Myers	Keith Myers					
	Mailing Address 211 Morning Mist	07 17 Y Y Y Y 0808					
	City	State	Zip Code	Transaction ID: SA11AI.5637			
	Sunset	LA	70584	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.00 Bi-Weekly Payroll Deducti-			
	Name of Employer The LHC Group	Occupatio Presiden		on (\$40.00)			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	2780.00]			
в.	Full Name (Last, First, Middle Initial) Harold Taylor	Date of Receipt					
	Mailing Address 252 Purple Dawn Drive	07 08 YYYYY 2008					
	City	State	Zip Code	Transaction ID: SA11AI.5615			
	Sunset	LA	70584	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		38.50			
	Name of Employer Oc La. Home Care Group, Inc. Diu		n of Purchasing	Bi-Weekly Payroll Deducti- on (\$38.50)			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) The second seco	0 0	731.50]			
C.	Full Name (Last, First, Middle Initial) Harold Taylor			Date of Receipt			
	Mailing Address 252 Purple Dawn Drive			07 17 Y Y Y Y Y 080 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
	City	State	Zip Code	Transaction ID: SA11AI.5643			
	Sunset	LA	70584	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		38.50 Bi-Weekly Payroll Deducti-			
	Name of Employer La. Home Care Group, Inc.	Occupatio Director	n of Purchasing	on (\$38.50)			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	770.00				
	SUBTOTAL of Receipts This Page (optional)			117.00			
				492.00			
	TOTAL This Period (last page this line number or	niy)	Þ				

	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	VE NUMBER: PAGE 11 / 12			
	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page				
	Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC					
Α.	Full Name (Last, First, Middle Initial) CHAMBLISS FOR SENATE Mailing Address POST OFFICE BOX 1246	69	Transaction ID: SB23.5653 Date of Disbursement			
		State Zip Code GA 30355	Amount of Each Disbursement this Period			
	Purpose of Disbursement Contribution	011	2000.00			
	Candidate Name CHAMBLISS FOR SENATE	Category/ Type	4			
	Office Sought: House Disburser X Senate President State: GA District: 00	ment For: 2008 Primary X General Other (specify) ▼				

	SUBTOTAL of Disbursements This Page (optional)	►	2000.00
	TOTAL This Period (last page this line number only)	►	2000.00
i	FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)

	SCHEDULE B (FE		for each	arate schedule(s) category of the Summary Page	FOR LINE (check onl 21b 27	NUMBER: y one) 22 23 23 28a 28b	PAGE 12 24 25 28c X 29	26 30b
	Any Information copied from or for commercial purposes,	other than using the nan					•	
	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC							
Α.			Transaction ID: SB29.5651 Date of Disbursement 077 / 01 / 2008					
	Mailing Address City Lafayette		State LA	Zip Code 70503		0 7 0 1 Amount of Each D		
	Purpose of Disbursemen Check Printing	t			001		28.	64
	Candidate Name				Category/ Type			
	S	enate	ement For: Primary	General				
	State: Distri	resident	Other (spe	ecity) 🔻				

	SUBTOTAL of Disbursements This Page (optional)	►	28.64
	TOTAL This Period (last page this line number only)	►	28.64
FE6AN026			FEC Schedule B (Form 3X) (Revised 02/2003)