



**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="2015"/>	<input type="text" value="21123.40"/>	<input type="text" value="21123.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="22383.13"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3132.70"/>	<input type="text" value="23899.57"/>
(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="25515.83"/>	<input type="text" value="45022.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5000.00"/>	<input type="text" value="24507.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20515.83"/>	<input type="text" value="20515.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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).....	2615.68	14435.60
(ii) Unitemized .....	517.02	9463.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3132.70	23899.57
(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) .....	3132.70	23899.57
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))..... ▶	3132.70	23899.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3132.70	23899.57

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	24500.00
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	7.14
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	24507.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	24507.14

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	3132.70	23899.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3132.70	23899.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 33  
(check only one)  
 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 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 ▼ **570.00**

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11Al.17139**  
 Amount of Each Receipt this Period **30.00**  
 Payroll Deduction (\$30 Bi-Weekly)

**B. 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 **10 / 21 / 2015**  
**Transaction ID : SA11Al.17140**  
 Amount of Each Receipt this Period **30.00**  
 Payroll Deduction (\$30 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 ▼ **630.00**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11Al.17141**  
 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: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Carolyn Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 Greenhaven Dr,  
 City Lafayette, State LA Zip Code 70508  
 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 **202.02**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11AI.17063**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

**B. Candance Comeaux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2209 Belle Ruelle,  
 City New Iberia State LA Zip Code 70563  
 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 **202.02**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11AI.17066**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

**C. Adrienne Davis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 Worthington Lane,  
 City Parkersburg State WV Zip Code 26104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DON  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **202.02**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11AI.17069**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>28.86</b>
<b>TOTAL</b> 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 9 OF 33  
(check only one)  
 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 EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Chris Duhon**

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 ▼ **630.00**

Date of Receipt  
**10 / 30 / 2015**  
**Transaction ID : SA11Al.17144**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Ronda Dupree**

Mailing Address 130 Hwy 132

City Delhi State LA Zip Code 71232

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  
**10 / 06 / 2015**  
**Transaction ID : SA11Al.17145**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**c. Ronda Dupree**

Mailing Address 130 Hwy 132

City Delhi State LA Zip Code 71232

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  
**10 / 21 / 2015**  
**Transaction ID : SA11Al.17146**

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: (check only one)	PAGE 10 OF 33
	<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. Ronda Dupree**  
Full Name (Last, First, Middle Initial)  
Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
---------------	-------------	-------------------

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 ▼ **630.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : SA11Al.17147**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

**B. Carlin Elrod**  
Full Name (Last, First, Middle Initial)  
Mailing Address 252 Fariview Street

City Humboldt	State TN	Zip Code 38343
------------------	-------------	-------------------

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

Name of Employer LHC Group	Occupation Physical Therapist
-------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.02**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : SA11Al.17072**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**C. Gloria Eschete**  
Full Name (Last, First, Middle Initial)  
Mailing Address 341 Sugar Plum St.

City Houma,	State LA	Zip Code 70364
----------------	-------------	-------------------

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 ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : SA11Al.17097**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>49.62</b>
<b>TOTAL</b> 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 33
	<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. Lessley Fontenot**  
Full Name (Last, First, Middle Initial)

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

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

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt **10 / 06 / 2015**

**Transaction ID : SA11AI.17136**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

**B. Lessley Fontenot**  
Full Name (Last, First, Middle Initial)

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

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

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 21 / 2015**

**Transaction ID : SA11AI.17137**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

**C. Lessley Fontenot**  
Full Name (Last, First, Middle Initial)

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

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

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 30 / 2015**

**Transaction ID : SA11AI.17138**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **75.00**

**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 33  
(check only one)  
 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 EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Jules Galiouras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 Woodmont Dr.  
 City Convington State LA Zip Code 70433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11AI.17117**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20 Bi-Weekly)

**B. Jules Galiouras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 Woodmont Dr.  
 City Convington State LA Zip Code 70433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 21 / 2015**  
**Transaction ID : SA11AI.17118**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20 Bi-Weekly)

**C. Jules Galiouras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 Woodmont Dr.  
 City Convington State LA Zip Code 70433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11AI.17119**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction (\$20 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**  
**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 13 OF 33
	<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
-----------------------------	-----------------------------	-----------------------------

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. Barbara Goodman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 W. Pinhook Road  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Regional Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 06 / 2015  
**Transaction ID : SA11AI.17111**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15 Bi-Weekly)

**B. Barbara Goodman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 W. Pinhook Road  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Regional Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11AI.17112**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15 Bi-Weekly)

**C. Barbara Goodman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 W. Pinhook Road  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Regional Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 30 / 2015  
**Transaction ID : SA11AI.17113**  
 Amount of Each Receipt this Period 15.00  
 Payroll Deduction (\$15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 33
	<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. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City	State	Zip Code
Birmingham,	AL	35226

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

Name of Employer	Occupation
LHC Group	State Operation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SA11Al.17148**

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	State	Zip Code
Birmingham,	AL	35226

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

Name of Employer	Occupation
LHC Group	State Operation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : SA11Al.17149**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction (\$30 Bi-Weekly)

**C. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City	State	Zip Code
Birmingham,	AL	35226

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

Name of Employer	Occupation
LHC Group	State Operation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : SA11Al.17150**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction (\$30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 33  
(check only one)  
 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 EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Richard Hollier</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>06</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		06		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		06		2015									
Mailing Address P.O. Box 95			<b>Transaction ID : SA11Al.17157</b>										
City Opleousas	State LA	Zip Code 70571	Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00									
40.00													
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)												
Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>760.00</td> </tr> </table>		760.00									
760.00													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼													

Full Name (Last, First, Middle Initial) <b>B. Richard Hollier</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		21		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		21		2015									
Mailing Address P.O. Box 95			<b>Transaction ID : SA11Al.17158</b>										
City Opleousas	State LA	Zip Code 70571	Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00									
40.00													
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)												
Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>800.00</td> </tr> </table>		800.00									
800.00													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼													

Full Name (Last, First, Middle Initial) <b>C. Richard Hollier</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		30		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		30		2015									
Mailing Address P.O. Box 95			<b>Transaction ID : SA11Al.17159</b>										
City Opleousas	State LA	Zip Code 70571	Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00									
40.00													
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)												
Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>840.00</td> </tr> </table>		840.00									
840.00													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼													

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>120.00</td> </tr> </table>	120.00
120.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 16 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Pamela Hooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 369 Sir Thomas Henry  
 City Opelousas State LA Zip Code 70570  
 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 **202.02**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11AI.17077**  
 Amount of Each Receipt this Period **9.62**  
 Payroll Deduction (\$9.62 Bi-Weekly)

**B. Melanie Kuehn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4205 Persimmon Way  
 City Lake Charles State LA Zip Code 70518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **950.00**

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11AI.17169**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50 Bi-Weekly)

**C. Melanie Kuehn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4205 Persimmon Way  
 City Lake Charles State LA Zip Code 70518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation DVP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 21 / 2015**  
**Transaction ID : SA11AI.17170**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>109.62</b>
<b>TOTAL</b> 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 17 OF 33
	<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. Melanie Kuehn**  
Full Name (Last, First, Middle Initial)

Mailing Address 4205 Persimmon Way

City Lake Charles State LA Zip Code 70518

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

Name of Employer LHC Group Occupation DVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt **10 / 30 / 2015**

**Transaction ID : SA11Al.17171**

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

**B. Amy Laing**  
Full Name (Last, First, Middle Initial)

Mailing Address 238 Dogwood Springs Lane

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **10 / 06 / 2015**

**Transaction ID : SA11Al.17160**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

**C. Amy Laing**  
Full Name (Last, First, Middle Initial)

Mailing Address 238 Dogwood Springs Lane

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **10 / 21 / 2015**

**Transaction ID : SA11Al.17161**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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 33
	<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
-----------------------------	-----------------------------	-----------------------------

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**

Mailing Address 238 Dogwood Springs Lane

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2015**

**Transaction ID : SA11AI.17162**

Amount of Each Receipt this Period  
**40.00**

Payroll Deduction (\$40 Bi-Weekly)

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

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  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 06 / 2015**

**Transaction ID : SA11AI.17121**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

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

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  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 21 / 2015**

**Transaction ID : SA11AI.17122**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 33
	<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 ▼ **420.00**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11Al.17123**

Amount of Each Receipt this Period **200.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. 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 ▼ **3610.00**

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11Al.17175**

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 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 ▼ **3800.00**

Date of Receipt **10 / 21 / 2015**  
**Transaction ID : SA11Al.17176**

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **400.00**

**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 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address 324 Deer Park Trail

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 ▼ **3990.00**

Date of Receipt **10 / 30 / 2015**

**Transaction ID : SA11Al.17177**

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 Bi-Weekly)

**B. Spencer Marks**  
Full Name (Last, First, Middle Initial)

Mailing Address 5467 Highway 182

City Opelousas State LA Zip Code 70570

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

Name of Employer LHC Group Occupation Telecom Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 30 / 2015**

**Transaction ID : SA11Al.17100**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

**C. Paul Mcdonald**  
Full Name (Last, First, Middle Initial)

Mailing Address 6120 Lindholm Dr,

City Mobile State AL Zip Code 36693

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

Name of Employer LHC Group Occupation PTA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 30 / 2015**

**Transaction ID : SA11Al.17103**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>210.00</b>
<b>TOTAL</b> 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 21 OF 33
	(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

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

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11Al.17163**  
Amount of Each Receipt this Period **40.00**  
Payroll Deduction (\$40 Bi-Weekly)

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

Date of Receipt **10 / 21 / 2015**  
**Transaction ID : SA11Al.17164**  
Amount of Each Receipt this Period **40.00**  
Payroll Deduction (\$40 Bi-Weekly)

**C. Brach Myers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 201 Worth Ave.  
City Lafayette State LA Zip Code 70508  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LHC Group Occupation Vice President of Strategic Partnershi  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **840.00**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11Al.17165**  
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 22 OF 33  
(check only one)  
 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 EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Keith Myers**  
 Full Name (Last, First, Middle Initial)  
 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  
 10 / 06 / 2015  
**Transaction ID : SA11Al.17166**  
 Amount of Each Receipt this Period  
 40.00  
 Payroll Deduction (\$40 Bi-Weekly)

**B. Keith Myers**  
 Full Name (Last, First, Middle Initial)  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11Al.17167**  
 Amount of Each Receipt this Period  
 40.00  
 Payroll Deduction (\$40 Bi-Weekly)

**C. Keith Myers**  
 Full Name (Last, First, Middle Initial)  
 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 ▼  
 840.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : SA11Al.17168**  
 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: (check only one)	PAGE 23 OF 33
	<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. 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  
 10 / 06 / 2015  
**Transaction ID : SA11Al.17114**

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  
 10 / 21 / 2015  
**Transaction ID : SA11Al.17115**

Amount of Each Receipt this Period  
 19.24

Payroll Deduction (\$19.24 Bi-Weekly)

**C. 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 ▼ **404.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : SA11Al.17116**

Amount of Each Receipt this Period  
 19.24

Payroll Deduction (\$19.24 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **57.72**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Linda Parlow</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2015 <b>Transaction ID : SA11AI.17084</b>
Mailing Address PO Box 15,		Amount of Each Receipt this Period 9.62
City Alamo	State TN	Zip Code 38001
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$9.62 Bi-Weekly)
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>B. Katie Reiman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2015 <b>Transaction ID : SA11AI.17087</b>
Mailing Address 815 Pecan Drive,		Amount of Each Receipt this Period 9.62
City St Gabriel	State LA	Zip Code 70776
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$9.62 Bi-Weekly)
Name of Employer LHC Group	Occupation Speech Pathology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>C. Melisa Rittenberry</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2015 <b>Transaction ID : SA11AI.17124</b>
Mailing Address 3341 Quail Run Ct		Amount of Each Receipt this Period 20.00
City Nashville	State TN	Zip Code 37214
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction (\$20 Bi-Weekly)
Name of Employer LHC Group	Occupation Regional Operations Directory	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	39.24
<b>TOTAL</b> 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 25 OF 33
	<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
-----------------------------	-----------------------------	-----------------------------

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. 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 10 / 21 / 2015  
**Transaction ID : SA11AI.17125**  
 Amount of Each Receipt this Period 200.00  
 Payroll Deduction (\$20 Bi-Weekly)

**B. 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 ▼ 420.00

Date of Receipt 10 / 30 / 2015  
**Transaction ID : SA11AI.17126**  
 Amount of Each Receipt this Period 200.00  
 Payroll Deduction (\$20 Bi-Weekly)

**C. William Sanford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5502 Coteau Road  
 City New Iberia State LA Zip Code 70560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 30 / 2015  
**Transaction ID : SA11AI.17107**  
 Amount of Each Receipt this Period 10.00  
 Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 33
	<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) <b>A. Albert Simien</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2015 <b>Transaction ID : SA11Al.17151</b>
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 38.50 Payroll Deduction (\$38.50 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 731.50	

Full Name (Last, First, Middle Initial) <b>B. Albert Simien</b>		Date of Receipt MM / DD / YYYY 10 / 21 / 2015 <b>Transaction ID : SA11Al.17152</b>
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 38.50 Payroll Deduction (\$38.50 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) <b>C. Albert Simien</b>		Date of Receipt MM / DD / YYYY 10 / 30 / 2015 <b>Transaction ID : SA11Al.17153</b>
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 38.50 Payroll Deduction (\$38.50 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 808.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 33
	<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. Anita Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 Winding Willows

City State Zip Code  
Bossier City LA 71111

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

Name of Employer Occupation  
LHC Group DVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
10 / 30 / 2015  
**Transaction ID : SA11AI.17110**

Amount of Each Receipt this Period  
10.00

Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 1113 Fawn Run

City State Zip Code  
Somerset, KY 92501

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

Name of Employer Occupation  
LHC Group State Market Development Dir.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
10 / 06 / 2015  
**Transaction ID : SA11AI.17127**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20 Bi-Weekly)

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

Mailing Address 1113 Fawn Run

City State Zip Code  
Somerset, KY 92501

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

Name of Employer Occupation  
LHC Group State Market Development Dir.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
10 / 21 / 2015  
**Transaction ID : SA11AI.17128**

Amount of Each Receipt this Period  
20.00

Payroll Deduction (\$20 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 33  
(check only one)  
 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 EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

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

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 ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2015**

**Transaction ID : SA11AI.17129**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

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

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  
**10 / 06 / 2015**

**Transaction ID : SA11AI.17154**

Amount of Each Receipt this Period  
**38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

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

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 ▼ **770.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 21 / 2015**

**Transaction ID : SA11AI.17155**

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 29 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**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 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 ▼ **808.50**

Date of Receipt **10 / 30 / 2015**  
**Transaction ID : SA11Al.17156**  
 Amount of Each Receipt this Period **38.50**  
 Payroll Deduction (\$38.50 Bi-Weekly)

**B. James Tobey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 465 Leo Avenue  
 City Shreveport State LA Zip Code 71105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Director of Sales and Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **950.00**

Date of Receipt **10 / 06 / 2015**  
**Transaction ID : SA11Al.17172**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50 Bi-Weekly)

**C. James Tobey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 465 Leo Avenue  
 City Shreveport State LA Zip Code 71105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Director of Sales and Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 21 / 2015**  
**Transaction ID : SA11Al.17173**  
 Amount of Each Receipt this Period **50.00**  
 Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>138.50</b>
<b>TOTAL</b> 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 30 OF 33
	(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

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. James Tobey**

Mailing Address 465 Leo Avenue

City Shreveport State LA Zip Code 71105

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

Name of Employer LHC Group Occupation Director of Sales and Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2015**

**Transaction ID : SA11Al.17174**

Amount of Each Receipt this Period  
**50.00**

Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Cynthia Wells**

Mailing Address 367 Adams Circle

City Crawfordsville State AR Zip Code 72327

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

Name of Employer LHC Groups Occupation Hospice Regional Operations Director

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  
**10 / 06 / 2015**

**Transaction ID : SA11Al.17130**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Cynthia Wells**

Mailing Address 367 Adams Circle

City Crawfordsville State AR Zip Code 72327

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

Name of Employer LHC Groups Occupation Hospice Regional Operations Director

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  
**10 / 21 / 2015**

**Transaction ID : SA11Al.17131**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 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 31 OF 33
	(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

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. Cynthia Wells**  
Full Name (Last, First, Middle Initial)  
Mailing Address 367 Adams Circle

City Crawfordsville	State AR	Zip Code 72327
------------------------	-------------	-------------------

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

Name of Employer LHC Groups	Occupation Hospice Regional Operations Director
--------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

**Transaction ID : SA11AI.17132**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

**B. Christa Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1549 Camelot Dr,

City Henderson	State KY	Zip Code 42420
-------------------	-------------	-------------------

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 ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SA11AI.17133**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

**C. Christa Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1549 Camelot Dr,

City Henderson	State KY	Zip Code 42420
-------------------	-------------	-------------------

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 ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : SA11AI.17134**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> 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 32 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Christa Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1549 Camelot Dr,  
 City Henderson State KY Zip Code 42420  
 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 ▼ 420.00

Date of Receipt 10 / 30 / 2015  
**Transaction ID : SA11AI.17135**  
 Amount of Each Receipt this Period 200.00  
 Payroll Deduction (\$20 Bi-Weekly)

**B. Cheryl Wyatt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 279  
 City Del Rio State TN Zip Code 37727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation RN BM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.02

Date of Receipt 10 / 30 / 2015  
**Transaction ID : SA11AI.17090**  
 Amount of Each Receipt this Period 9.62  
 Payroll Deduction (\$9.62 Bi-Weekly)

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	29.62
<b>TOTAL</b> This Period (last page this line number only).....▶	2615.68



# 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. CHARLES BOUSTANY JR. FOR CONGRESS

Mailing Address 2936 Johnston St.

City Lafayette State LA Zip Code 70503

Purpose of Disbursement  
Donation

011  
Category/  
Type

Candidate Name

CHARLES DR. JR. BOUSTANY Jr.

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : SB23.17178

Amount of Each Disbursement this Period

5000.00
---------

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

5000.00
---------

5000.00
---------