

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 420 W. Pinhook Road Suite A LAFAYETTE LA 70503

Check if different than previously reported. (ACC)

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

C C00382796

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 11 / 01 / 2013 through [MM] / [DD] / [YYYY] 11 / 30 / 2013

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

Type or Print Name of Treasurer Albert Simien

Signature of Treasurer Albert Simien [Electronically Filed] Date 12 / 20 / 2013

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

Office Use Only									
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**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="2013"/>		3939.54
(b) Cash on Hand at Beginning of Reporting Period.....	4604.37	
(c) Total Receipts (from Line 19)	4504.54	58159.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9108.91	62099.41
7. Total Disbursements (from Line 31).....	0.00	52990.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	9108.91	9108.91
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

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).....	3809.54	43749.82
(ii) Unitemized	695.00	11810.05
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4504.54	55559.87
(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)	4504.54	55559.87
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	2600.00
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))..... ▶	4504.54	58159.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4504.54	58159.87

DETAILED SUMMARY PAGE
of Disbursements

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.....	0.00	52650.00
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	340.50
(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	340.50
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	52990.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	52990.50

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)	4504.54	55559.87
34. Total Contribution Refunds (from Line 28(d))	0.00	340.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4504.54	55219.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 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. 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 ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13527

Amount of Each Receipt this Period

69.62

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
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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 ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13528

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30 Bi-Weekly)

C. 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 ▼ **230.88**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13549

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	69.62
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"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Carolyn Clark		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.13550
Mailing Address 220 Greenhaven Dr, City Lafayette, State LA Zip Code 70508		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	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 ▼ 240.50	

Full Name (Last, First, Middle Initial) B. Linda Cloer		Date of Receipt MM / DD / YYYY 11 / 12 / 2013 Transaction ID : SA11AI.13551
Mailing Address 8117 Spanish Oak Drive, City Gautier, State MS Zip Code 38553		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) C. Linda Cloer		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.13552
Mailing Address 8117 Spanish Oak Drive, City Gautier, State MS Zip Code 38553		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.50	

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 8 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	

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

A. Jamie Cole
Full Name (Last, First, Middle Initial)

Mailing Address HC 71 box 65,

City Asbury State WV Zip Code 24916

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

Name of Employer LHC Group Occupation Office Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
11 / 12 / 2013

Transaction ID : SA11AI.13576

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

B. Jamie Cole
Full Name (Last, First, Middle Initial)

Mailing Address HC 71 box 65,

City Asbury State WV Zip Code 24916

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

Name of Employer LHC Group Occupation Office Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
11 / 27 / 2013

Transaction ID : SA11AI.13577

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

C. 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 ▼ **230.88**

Date of Receipt
11 / 12 / 2013

Transaction ID : SA11AI.13553

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ **29.62**

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 9 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	

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

A. 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 ▼ 240.50

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11AI.13554
Amount of Each Receipt this Period 9.62
Payroll Deduction (\$9.62 Bi-Weekly)

B. Eric Cruickshank
Full Name (Last, First, Middle Initial)
Mailing Address 2206 Lacache,
City Lake Charles State LA Zip Code 70610
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation OT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.88

Date of Receipt 11 / 12 / 2013
Transaction ID : SA11AI.13555
Amount of Each Receipt this Period 9.62
Payroll Deduction (\$9.62 Bi-Weekly)

C. Eric Cruickshank
Full Name (Last, First, Middle Initial)
Mailing Address 2206 Lacache,
City Lake Charles State LA Zip Code 70610
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation OT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.50

Date of Receipt 11 / 27 / 2013
Transaction ID : SA11AI.13556
Amount of Each Receipt this Period 9.62
Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 28.86
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 10 OF 33
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Adrienne Davis

Mailing Address 8 Worthington Lane,

City Parkersburg	State WV	Zip Code 26104
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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 ▼ **230.88**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13557

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Adrienne Davis

Mailing Address 8 Worthington Lane,

City Parkersburg	State WV	Zip Code 26104
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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 ▼ **240.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13558

Amount of Each Receipt this Period

9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Anna DeLee

Mailing Address 17336 Hwy 432

City Clinton	State LA	Zip Code 70722
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Director of Nursing
-------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13578

Amount of Each Receipt this Period

10.00

Payroll Deduction (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	29.24
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 11 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Anna DeLee

Mailing Address 17336 Hwy 432

City State Zip Code
 Clinton LA 70722

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

Name of Employer Occupation
 LHC Group Director of Nursing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.13579

Amount of Each Receipt this Period
 10.00

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Rexanne Domico

Mailing Address 230 Pine Road

City State Zip Code
 Davidson NC 28036

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

Name of Employer Occupation
 LHC Group SVP Home Care Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2013
Transaction ID : SA11AI.13630

Amount of Each Receipt this Period
 500.00

Donation

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

Mailing Address 10429 Rue de Duhon

City State Zip Code
 Abbeville LA 70510

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

Name of Employer Occupation
 LHC Group RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.13529

Amount of Each Receipt this Period
 30.00

Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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 12 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	

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

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

Mailing Address 10429 Rue de Duhon

City Abbeville	State LA	Zip Code 70510
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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 ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13530

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
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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 ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13531

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 ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13532

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 13 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	

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

Full Name (Last, First, Middle Initial) A. Carlin Elrod		Date of Receipt MM / DD / YYYY 11 / 12 / 2013 Transaction ID : SA11AI.13559
Mailing Address 252 Farview STREET		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) B. Carlin Elrod		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.13560
Mailing Address 252 Farview STREET		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.50	

Full Name (Last, First, Middle Initial) C. Shayne Ferguson		Date of Receipt MM / DD / YYYY 11 / 12 / 2013 Transaction ID : SA11AI.13625
Mailing Address 390 Thicket Drive,		Amount of Each Receipt this Period 38.47 Payroll Deduction (\$38.47 Bi-Weekly)
City Elizabethtown,	State KY	Zip Code 42701
FEC ID number of contributing federal political committee. C		
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.28	

SUBTOTAL of Receipts This Page (optional).....▶	57.71
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 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	

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

Full Name (Last, First, Middle Initial) A. Shayne Ferguson		Date of Receipt
Mailing Address 390 Thicket Drive,		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Elizabethtown,	KY	42701
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13626
LHC Group	PT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="961.75"/>	<input type="text" value="38.47"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Barbara Goodman		Date of Receipt
Mailing Address 420 W. Pinhook Road		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Lafayette	LA	70503
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13621
LHC Group	Regional Manager	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	<input type="text" value="15.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$15 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Barbara Goodman		Date of Receipt
Mailing Address 420 W. Pinhook Road		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Lafayette	LA	70503
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13622
LHC Group	Regional Manager	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>	<input type="text" value="15.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="68.47"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 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	

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

Full Name (Last, First, Middle Initial) A. Mary Gray		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11Al.13533
Mailing Address 1528 Greenwich Circle		Amount of Each Receipt this Period 30.00
City Birmingham, State AL Zip Code 35226	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)
Name of Employer LHC Group Occupation State Operation Director	Aggregate Year-to-Date ▼ 720.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mary Gray		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11Al.13534
Mailing Address 1528 Greenwich Circle		Amount of Each Receipt this Period 30.00
City Birmingham, State AL Zip Code 35226	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)
Name of Employer LHC Group Occupation State Operation Director	Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) c. Christopher Hardy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11Al.13561
Mailing Address 161 Rue Katherine,		Amount of Each Receipt this Period 9.62
City Opelousas, State LA Zip Code 70570	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$9.62 Bi-Weekly)
Name of Employer LHC Group Occupation OT	Aggregate Year-to-Date ▼ 230.88	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	69.62
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Christopher Hardy

Mailing Address 161 Rue Katherine,

City State Zip Code
 Opelousas LA 70570

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

Name of Employer Occupation
 LHC Group OT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.13563

Amount of Each Receipt this Period
 9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Carla Hengst

Mailing Address 400 Earth Wood Court

City State Zip Code
 Louisville KY 40245

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

Name of Employer Occupation
 LHC Group Sr. VP of Community Based Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.13628

Amount of Each Receipt this Period
 1000.00

Donation

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

Mailing Address P.O. Box 95

City State Zip Code
 Opleousas LA 70571

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.13615

Amount of Each Receipt this Period
 40.00

Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1049.62

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 17 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	

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

Full Name (Last, First, Middle Initial) A. Richard Hollier			Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13616
Mailing Address P.O. Box 95			Amount of Each Receipt this Period 40.00
City Opleusas	State LA	Zip Code 70571	Payroll Deduction (\$40 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00	
Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pamela Hooks			Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11AI.13564
Mailing Address 369 Sir Thomas Henry			Amount of Each Receipt this Period 9.62
City Opelousas	State LA	Zip Code 70570	Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.88	
Name of Employer LHC Group	Occupation RN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Pamela Hooks			Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13565
Mailing Address 369 Sir Thomas Henry			Amount of Each Receipt this Period 9.62
City Opelousas	State LA	Zip Code 70570	Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 240.50	
Name of Employer LHC Group	Occupation RN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional).....▶	59.24
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 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	

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

Full Name (Last, First, Middle Initial) A. Kathleen Keirle		Date of Receipt
Mailing Address 907 Cindy Lane,		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Westminister	MD	21157
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13566
LHC Group	RN	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.88"/>	<input type="text" value="9.62"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Kathleen Keirle		Date of Receipt
Mailing Address 907 Cindy Lane,		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
Westminister	MD	21157
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13567
LHC Group	RN	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.50"/>	<input type="text" value="9.62"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Jeffrey Kreger		Date of Receipt
Mailing Address 100 Creek Bnd		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Lafayette	LA	70508
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.13619
LHC Group	Sr. VP of Finance	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3000.00"/>	<input type="text" value="200.00"/>
<input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$200 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="219.24"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 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	

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

Full Name (Last, First, Middle Initial) A. Jeffrey Kreger		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11Al.13620
Mailing Address 100 Creek Bnd		Amount of Each Receipt this Period 200.00 Payroll Deduction (\$200 Bi-Weekly)
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Sr. VP of Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3200.00	

Full Name (Last, First, Middle Initial) B. Melanie Kuehn		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11Al.13617
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Melanie Kuehn		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11Al.13618
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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	

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

A. 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 ▼ **740.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.13613

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40 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 ▼ **780.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.13614

Amount of Each Receipt this Period
40.00

Payroll Deduction (\$40 Bi-Weekly)

C. 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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.13582

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 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 21 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	

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

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

Mailing Address 5467 Highway 182

City Opelousas	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Telecom Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13583

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 6120 Lindholm Dr,

City Mobile	State AL	Zip Code 36693
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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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11AI.13584

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

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

Mailing Address 6120 Lindholm Dr,

City Mobile	State AL	Zip Code 36693
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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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11AI.13585

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 22 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	

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

Full Name (Last, First, Middle Initial) A. Keith Myers		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11Al.13609
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5960.00	

Full Name (Last, First, Middle Initial) B. Keith Myers		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11Al.13610
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) C. Cathy Newhouse		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11Al.13607
Mailing Address 97 Stonehill Road		Amount of Each Receipt this Period 50.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50 Bi-Weekly)
Name of Employer LHC Group	Occupation Sr. VP of Clinical Program Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 97 Stonehill Road

City Lafayette State LA Zip Code 70508

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.13608

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

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

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 ▼ **461.76**

Date of Receipt **11 / 12 / 2013**

Transaction ID : SA11AI.13605

Amount of Each Receipt this Period **19.24**

Payroll Deduction (\$19.24 Bi-Weekly)

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

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 ▼ **481.00**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.13606

Amount of Each Receipt this Period **19.24**

Payroll Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **88.48**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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	

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

A. Linda Parlow
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

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 ▼ **209.62**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2013

Transaction ID : SA11AI.13568

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

B. Linda Parlow
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

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 ▼ **219.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : SA11AI.13569

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

C. Katie Reiman
Full Name (Last, First, Middle Initial)

Mailing Address 815 Pecan Drive,

City St Gabriel State LA Zip Code 70776

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

Name of Employer LHC Group Occupation Speech Pathology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2013

Transaction ID : SA11AI.13570

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	28.86
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 25 OF 33
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Katie Reiman

Mailing Address 815 Pecan Drive,

City St Gabriel	State LA	Zip Code 70776
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Speech Pathology
-------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.13571

Amount of Each Receipt this Period
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. William Sanford

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2013

Transaction ID : SA11Al.13588

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. William Sanford

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2013

Transaction ID : SA11Al.13589

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	29.62
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 26 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	

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

A. Albert Simien
Full Name (Last, First, Middle Initial)

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

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

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **924.00**

Date of Receipt **11 / 12 / 2013**

Transaction ID : SA11AI.13600

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

B. Albert Simien
Full Name (Last, First, Middle Initial)

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

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

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **962.50**

Date of Receipt **11 / 27 / 2013**

Transaction ID : SA11AI.13602

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

C. Cindy Sobel
Full Name (Last, First, Middle Initial)

Mailing Address 2037 Country Wood Court

City Walnut Creek State CA Zip Code 94598

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

Name of Employer LHC Group Occupation Director of Nurses

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 12 / 2013**

Transaction ID : SA11AI.13598

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	127.00
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 27 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	

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

A. Cindy Sobel
Full Name (Last, First, Middle Initial)

Mailing Address 2037 Country Wood Court

City Walnut Creek State CA Zip Code 94598

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

Name of Employer LHC Group Occupation Director of Nurses

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11AI.13599**

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

B. Ann Spade
Full Name (Last, First, Middle Initial)

Mailing Address 3994 Lost Pavement Road

City Parkersburg State WV Zip Code 26101

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 ▼ **240.00**

Date of Receipt **11 / 12 / 2013**
Transaction ID : **SA11AI.13590**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

C. Ann Spade
Full Name (Last, First, Middle Initial)

Mailing Address 3994 Lost Pavement Road

City Parkersburg State WV Zip Code 26101

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 ▼ **250.00**

Date of Receipt **11 / 27 / 2013**
Transaction ID : **SA11AI.13591**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 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	

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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 ▼
880.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2013
Transaction ID : SA11AI.13592

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

B. 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 ▼
890.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2013
Transaction ID : SA11AI.13593

Amount of Each Receipt this Period
10.00

Payroll Deduction (\$10 Bi-Weekly)

C. Lori Stagg
Full Name (Last, First, Middle Initial)

Mailing Address 204 Founders St.

City State Zip Code
Lafayette LA 70508

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

Name of Employer Occupation
LHC Group DVP - Hospice Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2013
Transaction ID : SA11AI.13537

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 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: (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	

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

Full Name (Last, First, Middle Initial) A. Lori Stagg			Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13538
Mailing Address 204 Founders St.			Amount of Each Receipt this Period 30.00
City Lafayette	State LA	Zip Code 70508	Payroll Deduction (\$30 Bi-Weekly)
FEC ID number of contributing federal political committee.	C		
Name of Employer LHC Group	Occupation DVP - Hospice Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) B. Tami Stout			Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11AI.13521
Mailing Address 1113 Fawn Run			Amount of Each Receipt this Period 20.00
City Somerset,	State KY	Zip Code 92501	Payroll Deduction (\$20 Bi-Weekly)
FEC ID number of contributing federal political committee.	C		
Name of Employer LHC Group	Occupation State Market Development Dir.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. Tami Stout			Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13522
Mailing Address 1113 Fawn Run			Amount of Each Receipt this Period 20.00
City Somerset,	State KY	Zip Code 92501	Payroll Deduction (\$20 Bi-Weekly)
FEC ID number of contributing federal political committee.	C		
Name of Employer LHC Group	Occupation State Market Development Dir.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 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	

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

Full Name (Last, First, Middle Initial) A. Harold Taylor		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11AI.13603
Mailing Address 252 Purple Dawn Drive		Amount of Each Receipt this Period 38.50
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$38.50 Bi-Weekly)
Name of Employer La. Home Care Group, Inc.	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00	

Full Name (Last, First, Middle Initial) B. Harold Taylor		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13604
Mailing Address 252 Purple Dawn Drive		Amount of Each Receipt this Period 38.50
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$38.50 Bi-Weekly)
Name of Employer La. Home Care Group, Inc.	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 962.50	

Full Name (Last, First, Middle Initial) C. Gary Thietten		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11AI.13596
Mailing Address 10611 Pine Shadow Road		Amount of Each Receipt this Period 100.00
City South Jordan	State UT	Zip Code 84095
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$100 Bi-Weekly)
Name of Employer LHC Group	Occupation VP of Corp. Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional).....▶	177.00
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 31 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	

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

Full Name (Last, First, Middle Initial) A. Gary Thietten		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.13597
Mailing Address 10611 Pine Shadow Road		Amount of Each Receipt this Period 100.00
City South Jordan	State UT	Zip Code 84095
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$100 Bi-Weekly)	
Name of Employer LHC Group	Occupation VP of Corp. Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. James Tobey		Date of Receipt MM / DD / YYYY 11 / 12 / 2013 Transaction ID : SA11AI.13594
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Director of Sales and Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. James Tobey		Date of Receipt MM / DD / YYYY 11 / 27 / 2013 Transaction ID : SA11AI.13595
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Director of Sales and Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 32 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	

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

A. Jackie Weeks
Full Name (Last, First, Middle Initial)

Mailing Address 4507 Briarwood Terrace,

City Marshall State TX Zip Code 75672

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 ▼ **230.88**

Date of Receipt **11 / 12 / 2013**
Transaction ID : SA11AI.13572

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

B. Jackie Weeks
Full Name (Last, First, Middle Initial)

Mailing Address 4507 Briarwood Terrace,

City Marshall State TX Zip Code 75672

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 ▼ **240.50**

Date of Receipt **11 / 27 / 2013**
Transaction ID : SA11AI.13573

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 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 ▼ **282.78**

Date of Receipt **11 / 12 / 2013**
Transaction ID : SA11AI.13525

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **39.24**

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 33 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	

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

Full Name (Last, First, Middle Initial) A. Christa Williams		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13526
Mailing Address 1549 Camelot Dr, City Henderson State KY Zip Code 42420		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	Payroll Deduction (\$20 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.78	

Full Name (Last, First, Middle Initial) B. Cheryl Wyatt		Date of Receipt M M / D D / Y Y Y Y Y 11 / 12 / 2013 Transaction ID : SA11AI.13574
Mailing Address P.O. Box 279 City Del Rio State TN Zip Code 37727		Amount of Each Receipt this Period 9.62
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN BM	Payroll Deduction (\$9.62 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) c. Cheryl Wyatt		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2013 Transaction ID : SA11AI.13575
Mailing Address P.O. Box 279 City Del Rio State TN Zip Code 37727		Amount of Each Receipt this Period 9.62
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN BM	Payroll Deduction (\$9.62 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.50	

SUBTOTAL of Receipts This Page (optional).....▶	39.24
TOTAL This Period (last page this line number only).....▶	3809.54