

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**
Gulf Coast Bank & Trust WAVE PAC

ADDRESS (number and street) 201 N CARROLLTON AVE
Check if different than previously reported. (ACC) NEW ORLEANS LA 70119

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00496588 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 06 / 2018 in the State of LA

5. Covering Period 10 / 18 / 2018 through 11 / 26 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
LITTLEFIELD, GARY, , ,
Type or Print Name of Treasurer

Signature of Treasurer LITTLEFIELD, GARY, , , [Electronically Filed] Date 12 / 04 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Gulf Coast Bank & Trust WAVE PAC

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="2018"/>	<input type="text" value="15646.98"/>	<input type="text" value="15646.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21522.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2429.38"/>	<input type="text" value="20004.92"/>
(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="23951.90"/>	<input type="text" value="35651.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20000.00"/>	<input type="text" value="31700.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3951.90"/>	<input type="text" value="3951.90"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Gulf Coast Bank & Trust WAVE PAC

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).....	2429.00	13665.00
(ii) Unitemized	0.00	6282.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2429.00	19947.50
(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)	2429.00	19947.50
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.).....	0.38	57.42
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)).....▶	2429.38	20004.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2429.38	20004.92

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.....	20000.00	31700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	20000.00	31700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20000.00	31700.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2429.00	19947.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2429.00	19947.50
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. AMOS, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5420 ALPACA DRIVE
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 168.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12350
 Amount of Each Receipt this Period 21.00
 Memo Item
 \$7.00 BI-WEEKLY PAYROLL

B. AROCHA, ROXANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 LONGWOOD DRIVE
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BRANCH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12342
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

C. BARTHOLOMEW, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2744 ACORN STREET
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) LOAN SRVC SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 72.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12373
 Amount of Each Receipt this Period 9.00
 Memo Item
 \$3.00 BI-WEEKLY PAYROLL

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:	PAGE 7 OF 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. BEHLAR, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2612 INGRID LANE
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 168.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12349
 Amount of Each Receipt this Period
 21.00
 Memo Item
 \$7.00 BI-WEEKLY PAYROLL

B. BENEFIELD, THOMAS RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73507 PLANTATION STREET
 City COVINGTON State LA Zip Code 70435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST COMMERCIAL LENDER
 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 / 16 / 2018
Transaction ID : SA11AI.12341
 Amount of Each Receipt this Period
 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

C. BOGGS, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15197 AMANDA DRIVE
 City GONZALES State LA Zip Code 70737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST MRK MGR/COMMERCIAL LENDER
 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 / 16 / 2018
Transaction ID : SA11AI.12340
 Amount of Each Receipt this Period
 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶	81.00
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 8 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. BORDELON, HART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 UNIVERSITY DRIVE
 City HAMMOND State LA Zip Code 70401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MARKET PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12339
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

B. BRAUD, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 N. ATLANTA STREET
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12293
 Amount of Each Receipt this Period 3.00
 Memo Item
 \$1.00 BI-WEEKLY PAYROLL

C. CALDWELL, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4843 CHESTNUT STREET
 City NEW ORLEANS State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) VP COMPLIANCE/CR ADM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12338
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶	63.00
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 9 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. CARDEN, KARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 ALEXANDER DRIVE
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) LENDING PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 168.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12348
 Amount of Each Receipt this Period 21.00
 Memo Item
 \$7.00 BI-WEEKLY PAYROLL

B. CARPENTER, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30858 E. KNIGHT DRIVE
 City DENHAM SPRINGS State LA Zip Code 70726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) UNDERWRITING MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12363
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$5.00 BI-WEEKLY PAYROLL

C. CARTER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 MADERA CT.
 City KENNER State LA Zip Code 70065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12337
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	66.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. CARVER, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CARRIAGE LANE
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST HR DIRECTOR/VP GOV. RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12320
 Amount of Each Receipt this Period 45.00
 Memo Item
 \$15.00 BI-WEEKLY PAYROLL

B. CRESCIONI, MONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 METAIRIE HTS
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST EXECUTIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12362
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$5.00 BI-WEEKLY PAYROLL

C. CZERNIAK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 WEBSTER STREET
 City NEW ORLEANS State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST SR VP OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12309
 Amount of Each Receipt this Period 150.00
 Memo Item
 \$50.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. DASTE, JOEL, , , Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6004 CANAL BLVD.

City NEW ORLEANS	State LA	Zip Code 70124
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) DIVISION PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

Transaction ID : SA11AI.12319

Amount of Each Receipt this Period
60.00

Memo Item
\$20.00 BI-WEEKLY PAYROLL

B. DAVIS, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2319 BRIXHAM AVE.

City ORLANDO	State FL	Zip Code 32828
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) CHIEF CREDIT OFFICER
--	---

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	/	16	/	2018

Transaction ID : SA11AI.12336

Amount of Each Receipt this Period
30.00

Memo Item
\$10.00 BI-WEEKLY PAYROLL

C. DELGADO, IVETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3521 JUDY DRIVE

City MEREAX	State LA	Zip Code 70075
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MTG LOAN ORIGINATOR
--	--

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	/	19	/	2018

Transaction ID : SA11AI.12351

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. DELGADO, IVETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3521 JUDY DRIVE
 City MERE AUX State LA Zip Code 70075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12352
 Amount of Each Receipt this Period 10.00
 Memo Item

B. DICKEY, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 FOREST OAKS DR.
 City NEW ORLEANS State LA Zip Code 70131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CONSUMER BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12310
 Amount of Each Receipt this Period 105.00
 Memo Item
 \$35.00 BI-WEEKLY PAYROLL

C. FAGOT, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 COTTONWOOD COURT
 City SLIDELL State LA Zip Code 70461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) QUALITY CONTROL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12301
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶	121.00
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 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. FALKENSTEIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 BEECHWOOD GARDENS DRIVE
 City COVINGTON State LA Zip Code 70435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) EXEC VP COMMERCIAL LENDING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12318
 Amount of Each Receipt this Period 60.00
 Memo Item
 \$20.00 BI-WEEKLY PAYROLL

B. FAMULARO, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 822 N. TURNBULL DR.
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12335
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

C. FERNANDEZ, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 LILLYBANK DRIVE
 City BELLE CHASSE State LA Zip Code 70037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12321
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. FERNANDEZ, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 LILLYBANK DRIVE

City BELLE CHASSE	State LA	Zip Code 70037
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MTG LOAN ORIGINATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12322

Amount of Each Receipt this Period
 20.00

Memo Item

B. FINN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 LEIGHTON STREET

City GRETNA	State LA	Zip Code 70053
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) SENIOR CREDIT OFFICER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12313

Amount of Each Receipt this Period
 75.00

Memo Item
 \$25.00 BI-WEEKLY PAYROLL

C. FITTS, LAUREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 DUMAS WISE RD.

City CARRIERE	State MS	Zip Code 39426
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) BRANCH MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
72.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12372

Amount of Each Receipt this Period
 9.00

Memo Item
 \$3.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	104.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. GIONET, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6385 13TH AVE. S
 City GULFPORT State FL Zip Code 33707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12361
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$5.00 BI-WEEKLY PAYROLL

B. GUIDRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 TOPAZ STREET
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) SALES DEVELOPMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12343
 Amount of Each Receipt this Period 12.50
 Memo Item

C. GUIDRY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 471 TOPAZ STREET
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) SALES DEVELOPMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.50

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11AI.12345
 Amount of Each Receipt this Period 12.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
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 16 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. HEIDEN, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 OLIVE AVE
 City HARVEY State LA Zip Code 70058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 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 / 16 / 2018
Transaction ID : SA11AI.12334
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

B. HENDERSON, SHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25612 ROSEDOWN DR
 City DENHAM SPRINGS State LA Zip Code 70726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MORTGAGE LOAN PROCESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12302
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

C. HERRMANN, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 FOREST RIDGE BLVD
 City PEARL RIVER State LA Zip Code 70452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) OPERATIONS 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 / 16 / 2018
Transaction ID : SA11AI.12333
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶	66.00
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 17 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. HINGLE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 YVONNE DRIVE
 City AVONDALE State LA Zip Code 70094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 72.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12371
 Amount of Each Receipt this Period 9.00
 Memo Item
 \$3.00 BI-WEEKLY PAYROLL

B. HLADKY, WADE MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1519 ARISTOCRAT DRIVE
 City COVINGTON State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BC PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12317
 Amount of Each Receipt this Period 60.00
 Memo Item
 \$20.00 BI-WEEKLY PAYROLL

C. HOLLIER, GREGORY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2112 METAIRIE COURT
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12316
 Amount of Each Receipt this Period 60.00
 Memo Item
 \$20.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	129.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. HRUBES, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 JANET DRIVE
 City ST. ROSE State LA Zip Code 70087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COST BANK & TRUST MORTGAGE LOAN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12304
 Amount of Each Receipt this Period 6.00
 Memo Item
\$2.00 BI-WEEKLY PAYROLL

B. JACKSON-BLAKE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 ROBBINS REST CIRCLE
 City DAVENPORT State FL Zip Code 33896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRUST INVOICE PRO ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12294
 Amount of Each Receipt this Period 3.00
 Memo Item
\$1.00 BI-WEEKLY PAYROLL

C. JENKINS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10222 N. HARVEY DRIVE
 City BATON ROUGE State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GULF COAST BANK & TRST OPERATIONS MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12357
 Amount of Each Receipt this Period 18.00
 Memo Item
\$6.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	27.00
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 19 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. JONES, MILLICENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 GRAND CAYON DRIVE

City NEW ORLEANS	State LA	Zip Code 70131
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) DR. OF EDUCATION SERV
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12312

Amount of Each Receipt this Period
75.00

Memo Item
\$25.00 BI-WEEKLY PAYROLL

B. KENNEDY, NICOLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 HESPER AVE

City METAIRIE	State LA	Zip Code 70005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) TRUST OPS MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
144.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12356

Amount of Each Receipt this Period
18.00

Memo Item
\$6.00 BI-WEEKLY PAYROLL

C. KYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MAGNOLIA LANE

City SLIDELL	State LA	Zip Code 70461
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12332

Amount of Each Receipt this Period
30.00

Memo Item
\$10.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. KYLE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MAGNOLIA LANE
 City SLIDELL State LA Zip Code 70461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MGR SPECIAL ASSETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 168.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12347
 Amount of Each Receipt this Period 21.00
 Memo Item
 \$7.00 BI-WEEKLY PAYROLL

B. LATERRADE, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SPANISH MOSS CT
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12369
 Amount of Each Receipt this Period 10.00
 Memo Item

C. LAVIERI, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 70TH STREET N
 City ST. PETERSBURG State FL Zip Code 33710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12295
 Amount of Each Receipt this Period 3.00
 Memo Item
 \$1.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	34.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. LIGGANS, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 E GREENBRIER DRIVE
 City NEW ORLEANS State LA Zip Code 70128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12331
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

B. LITTLEFIELD, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1165 MELANIE STREET
 City Baton Rouge State LA Zip Code 70806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MARKET PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12308
 Amount of Each Receipt this Period 150.00
 Memo Item
 \$50.00 BI-WEEKLY PAYROLL

C. LOPEZ, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 BRADBURY DRIVE
 City MERAUX State LA Zip Code 70075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MGR SPECIAL ASSETS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12360
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$5.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 195.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. MAGGIO, JENNIFER DUPRE, Dupre, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 HEATHER DR
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BUSINESS SOLUTIONS MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12359
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$5.00 BI-WEEKLY PAYROLL

B. MANDULA, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1355 BRIGHTWATERS BLVD., NE
 City ST. PETERSBURG State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CHIEF MARKETING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12307
 Amount of Each Receipt this Period 150.00
 Memo Item
 \$50.00 BI-WEEKLY PAYROLL

C. MANOUSIADES, THEODORUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3016 156TH TERRACE E
 City PARISSH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) ACCOUNT EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12296
 Amount of Each Receipt this Period 3.00
 Memo Item
 \$1.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	168.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. NAVARRE, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 NAVARRE LN
 City BELLE CHASSE State LA Zip Code 70037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) RETAIL FINANCIAL REP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 168.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12346
 Amount of Each Receipt this Period 21.00
 Memo Item
 \$7.00 BI-WEEKLY PAYROLL

B. NICHOLS, LOUANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2940 PENWOOD DRIVE
 City GRETNA State LA Zip Code 70056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) CALL CENTER SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12330
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

C. NUGENT, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 DONA AVENUE
 City METAIRIE State LA Zip Code 70003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) LOAN PORTFOLIO MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12305
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	57.00
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 24 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. OGG, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6044 CAMP STREET
 City NEW ORLEANS State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 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 / 16 / 2018
Transaction ID : SA11AI.12329
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

B. OHMER, JENNIFER LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 NEWTON STREET
 City GRETNA State LA Zip Code 70053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) DR OF LOAN PORTFOLIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12355
 Amount of Each Receipt this Period 18.00
 Memo Item
 \$6.00 BI-WEEKLY PAYROLL

C. OUBRE, RENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 MARIE DR
 City GRETNA State LA Zip Code 70053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERCIAL LENDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12315
 Amount of Each Receipt this Period 60.00
 Memo Item
 \$20.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	108.00
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 25 OF 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. PARKER, ROBERT, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 BARRETT DR.
 City LULING State LA Zip Code 70070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12368
 Amount of Each Receipt this Period 10.00
 Memo Item

B. PATERNOSTRO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2653 DOVE AVE
 City MARRERO State LA Zip Code 70072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) VP OF SPECIAL ASSETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12328
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

C. PATTON, CHLOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1666 ABUNDANCE ST.
 City NEW ORLEANS State LA Zip Code 70119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) RELATIONSHIP BANKER I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 24.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12297
 Amount of Each Receipt this Period 3.00
 Memo Item
 \$1.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	43.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. ROY, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 CORRINE DRIVE
 City CHALMETTE State LA Zip Code 70043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BRANCH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 72.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12370
 Amount of Each Receipt this Period 9.00
 Memo Item
 \$3.00 BI-WEEKLY PAYROLL

B. SCHEUERMANN, JOANI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 WEST PINEWOOD DR.
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12292
 Amount of Each Receipt this Period 2.00
 Memo Item
 \$1.00 BI-WEEKLY PAYROLL

C. SIMONS, SLADE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7615 JEANETTE STREET
 City NEW ORLEANS State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) EXEC VP WEALTH MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12314
 Amount of Each Receipt this Period 60.00
 Memo Item
 \$20.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. SMITH, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 SERE STREET
 City NEW ORLEANS State LA Zip Code 70122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMPLIANCE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12378
 Amount of Each Receipt this Period 6.00
 Memo Item
\$2.00 BI-WEEKLY PAYROLL

B. SMITH, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 ROSA AVENUE
 City METAIRIE State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) TRUST OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12327
 Amount of Each Receipt this Period 30.00
 Memo Item
\$10.00 BI-WEEKLY PAYROLL

C. SMITH, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 MORNINGSIDE DRIVE
 City GRETNA State LA Zip Code 70056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MORTGAGE LOAN PROCESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12377
 Amount of Each Receipt this Period 6.00
 Memo Item
\$2.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	42.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. SPENCER, MICKEY TAYLOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 BATH STREET
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12326
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

B. TALAMO, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4726 DOWNING DRIVE
 City BATON ROUGE State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12366
 Amount of Each Receipt this Period 10.00
 Memo Item

C. TONDREAU, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4681 32ND AVE W
 City ST. PETERSBURG State FL Zip Code 33713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) STAFF ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12376
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	46.00
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 30 OF 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. TOSO, BRIEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1312 BROADWAY STREET

City NEW ORLEANS	State LA	Zip Code 70118
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) OPERATIONS DEPT MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2018

Transaction ID : SA11AI.12375

Amount of Each Receipt this Period
6.00

Memo Item
\$2.00 BI-WEEKLY PAYROLL

B. UZEE, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5053 CRAIG AVENUE

City KENNER	State LA	Zip Code 70065
----------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MTG LOAN ORIGINATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2018

Transaction ID : SA11AI.12324

Amount of Each Receipt this Period
15.00

Memo Item

C. UZEE, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5053 CRAIG AVENUE

City KENNER	State LA	Zip Code 70065
----------------	-------------	-------------------

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

Name of Employer (for Individual) GULF COAST BANK & TRUST	Occupation (for Individual) MTG LOAN ORIGINATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2018

Transaction ID : SA11AI.12325

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. VANDERBROOK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1184 BROOK COURT
 City MANDEVILLE State LA Zip Code 70448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 105.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.12364
 Amount of Each Receipt this Period 5.00
 Memo Item

B. VANDERBROOK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1184 BROOK COURT
 City MANDEVILLE State LA Zip Code 70448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12365
 Amount of Each Receipt this Period 5.00
 Memo Item

C. VAN HOVEN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6168 CORBERT ST.
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) COMMERCIAL LENDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12311
 Amount of Each Receipt this Period 75.00
 Memo Item
 \$25.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....	85.00
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 40
	<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)
Gulf Coast Bank & Trust WAVE PAC

A. WARNER, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2316 CHALONA DRIVE
 City CHALMETTE State LA Zip Code 70043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MRK MGR/COMMERICAL LENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 144.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12353
 Amount of Each Receipt this Period 18.00
 Memo Item
 \$6.00 BI-WEEKLY PAYROLL

B. WILLIAMS, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 SWALLOW ST
 City NEW ORLEANS State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12306
 Amount of Each Receipt this Period 150.00
 Memo Item
 \$50.00 BI-WEEKLY PAYROLL

C. WINCHESTER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 MORALES STREET
 City METAIRIE State LA Zip Code 70006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) APPRAISAL REVIEW REP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 48.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.12374
 Amount of Each Receipt this Period 6.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

SUBTOTAL of Receipts This Page (optional).....▶ 174.00
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 33 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. WOOD, ALEX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4240 ILLINOIS AVE
 City KENNER State LA Zip Code 70065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) MTG LOAN ORIGINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2018
Transaction ID : SA11AI.12300
 Amount of Each Receipt this Period 4.00
 Memo Item
 \$2.00 BI-WEEKLY PAYROLL

B. WRBA, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1622
 City CUMMINGS State GA Zip Code 30028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GULF COAST BANK & TRUST Occupation (for Individual) BUSINESS DEVELOPMENT
 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 / 16 / 2018
Transaction ID : SA11AI.12323
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 BI-WEEKLY PAYROLL

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	34.00
TOTAL This Period (last page this line number only).....	2429.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

Full Name (Last, First, Middle Initial)
A. ANDY BARR FOR CONGRESS, INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address PO BOX 2059

City LEXINGTON State KY Zip Code 40588

FEC Identification Number

C C00467571

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12450

Amount of Each Disbursement this Period

1000.00

Candidate Name

BARR, ANTHONY J, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District: 09

Memo Item

Full Name (Last, First, Middle Initial)
B. COFFMAN FOR CONGRESS 2018

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address 4950 S YOSEMITE STREET F2 #511

City GREENWOOD VILLAGE State CO Zip Code 80111

FEC Identification Number

C C00629287

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12440

Amount of Each Disbursement this Period

1000.00

Candidate Name

COFFMAN, MIKE REP., , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CO District: 06

Memo Item

Full Name (Last, First, Middle Initial)
C. COMSTOCK FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address PO BOX 831

City MC LEAN State VA Zip Code 22101

FEC Identification Number

C C00554261

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12442

Amount of Each Disbursement this Period

1000.00

Candidate Name

COMSTOCK, BARBARA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District: 10

Memo Item

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

3000.00

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

**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"/> 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

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
PAULSEN, ERIK MR., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MN District: 03

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 18 / 2018

FEC Identification Number
C C00439661
Transaction ID : SB23.12433
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JASON LEWIS FOR CONGRESS, INC.

Mailing Address 13800 NICOLLET BLVD.
PO BOX 3055

City BURNSVILLE State MN Zip Code 55337

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
LEWIS, JASON MARK MR., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MN District: 02

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 18 / 2018

FEC Identification Number
C C00589234
Transaction ID : SB23.12395
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE BISHOP FOR CONGRESS

Mailing Address PO BOX 1148

City BRIGHTON State MI Zip Code 48116

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Candidate Name
BISHOP, MIKE, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 08

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 18 / 2018

FEC Identification Number
C C00561001
Transaction ID : SB23.12443
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

3000.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

Full Name (Last, First, Middle Initial) A. ROSKAM FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address P. O. BOX 713		FEC Identification Number C C00410969 Transaction ID : SB23.12389
City WHEATON	State IL	Zip Code 60187
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name ROSKAM, PETER, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 06	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ROTHFUS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address PO BOX 435		FEC Identification Number C C00497115 Transaction ID : SB23.12388
City SEWICKLEY	State PA	Zip Code 15143
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name ROTHFUS, KEITH MR., , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 17	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SCOTT TAYLOR FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address 2100 MEDITERRANEAN AVENUE #247		FEC Identification Number C C00468264 Transaction ID : SB23.12446
City VIRGINIA BEACH	State VA	Zip Code 23451
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type 011
Candidate Name TAYLOR, SCOTT W. MR., , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 02	<input type="checkbox"/> Memo Item	

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

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

3000.00

**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"/> 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

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

Full Name (Last, First, Middle Initial)
A. STEVE CHABOT FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address 3030 HARRISON AVE.

City CINCINNATI State OH Zip Code 45211

FEC Identification Number

C C00301838

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12445

Amount of Each Disbursement this Period

1000.00

Candidate Name

CHABOT, STEVE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District: 01

Memo Item

Full Name (Last, First, Middle Initial)
B. STEVE KNIGHT FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address PO BOX 730

City HILMAR State CA Zip Code 95324

FEC Identification Number

C C00554014

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12439

Amount of Each Disbursement this Period

1000.00

Candidate Name

KNIGHT, STEVE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 25

Memo Item

Full Name (Last, First, Middle Initial)
C. TOM MACARTHUR FOR CONGRESS INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Mailing Address PO BOX 999

City EDISON State NJ Zip Code 08818

FEC Identification Number

C C00557520

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Transaction ID : SB23.12432

Amount of Each Disbursement this Period

1000.00

Candidate Name

MACARTHUR, THOMAS, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 03

Memo Item

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

3000.00

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

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

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Gulf Coast Bank & Trust WAVE PAC

A. YODER FOR CONGRESS, INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name YODER, KEVIN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: KS District: 03

Date of Disbursement: 10 / 18 / 2018

FEC Identification Number: C00472365
Transaction ID : SB23.12447

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	20000.00