PAGE 1 / 10

Image# 201604209014647985

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other	Than An Au	thorized C	ommitt	ee		Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR I	PRINT ▼		le: If typi le lines.	ng, type	12FE4M5		
LOUISIANA HEALTH (	CARE GR	OUP EMPLO	YEE FED	ERAL	POLITICA	L ACTION	COMMITTE	E INC
ADDRESS (number and street)	420 W. P	inhook Road						
Check if different than previously reported. (ACC)	Suite A  LAFAYE	TTE				LA L	70503	
2. FEC IDENTIFICATION N	NUMBER <b>▼</b>	C	ITY 🛦		;	STATE A	ZIP CO	DDE ▲
C C00382796		_	IS THIS REPORT		NEW (N) <b>OR</b>	AM (A)	IENDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Mor Rep Due	ort On: Ma	b 20 (M2) ar 20 (M3) or 20 (M4)	Ĭ	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report	(Q2) (Q3)	12-Day PRE-Election Report for the:	Co	mary (12I		General (		
July 31 Mid-Year Report (Non-elect Year Only) (MY)  Termination Repo (TER)		30-Day POST-Election Report for the:	Ge	eneral (30	G) /	Runoff (3	in the	
5. Covering Period	D3 01	2016		through	03	31/	2016	
I certify that I have examined Type or Print Name of Treasur	-		of my knowled	dge and	belief it is tru	e, correct and	d complete.	
Signature of Treasurer Alb	vert Simien		[El	ectronicali	ly Filed] □	vate 04	20	2016
NOTE: Submission of false, erro	neous, or inc	omplete informati	on may subje	ct the per	son signing th	nis Report to th	ne penalties of 2	U.S.C. §437g.
Office Use Only							FEC FOI Rev. 12/	

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2016		12700.93
(b) Cash on Hand at Beginning of Reporting Period	11781.41	
(c) Total Receipts (from Line 19)	2015.64	6096.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13797.05	18797.08
Total Disbursements (from Line 31)	2000.00	7000.03
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11797.05	11797.05
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

	COLUMN A	COLUMNI B				
I. Receipts	Total This Period	COLUMN B Calendar Year-to-Date				
. Contributions (other than loans) From:  (a) Individuals/Persons Other						
Than Political Committees  (i) Itemized (use Schedule A)	817.00	1387.00				
(ii) Unitemized	1198.64	4709.16				
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	2015.64	6096.16				
(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)	2015.64	6096.16				
. Transfers From Affiliated/Other Party Committees	0.00	0.00				
. All Loans Received	0.00	0.00				
. Loan Repayments Received	0.00	0.00				
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00				
to Federal Candidates and Other Political Committees	0.00	0.00				
Other Federal Receipts     (Dividends, Interest, etc.)      Transfers from Non-Federal and Levin Funds	0.00	0.00				
(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				
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	2015.64	6096.16				
Total Federal Receipts (subtract Line 18(c) from Line 19)▶	2015.64	6096.16				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: -  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)		53.5.3.2.1.15a.15 5416
	(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	3.00	
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	7000.00
24.	Independent Expenditures	0.00	0.00
25.	(use Schedule E)	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	· · · · · · · · · · · · · · · · · · ·		
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	0.00	0.03
	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) III origin Chara	0.00	0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	2.22
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2000.00	7000.03
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2000.00	7000.03

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO I GIIII GA (1101. OL/LOGO)		1 490 0
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2015.64	6096.16
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2015.64	6096.16
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

FOR L	PAGE	6	OF	10			
(check	only o						
X 1	11c	12					
1	3	14		15	16		17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GI	ROUP EMPLOYEE FEDERAL POLITI	ICAL ACTION COMMITTEE INC
Full Name (Last, First, Middle Initial)  A. Richard Hollier  Mailing Address P.O. Box 95		Date of Receipt
City Opleousas  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Health Care Group, I Receipt For:  Primary General Other (specify)	State Zip Code LA 70571  C  Occupation Legal Compliance  Aggregate Year-to-Date ▼  240.00	Transaction ID: SA11AI.17719  Amount of Each Receipt this Period  40.00  Memo Item  Payroll Deduction (\$40 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Melanie Kuehn  Mailing Address 4205 Persimmon Way  City Lake Charles  FEC ID number of contributing federal political committee.  Name of Employer LHC Group  Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code LA 70518  C  Occupation DVP  Aggregate Year-to-Date ▼  250.00	Date of Receipt  03 11 2016  Transaction ID: SA11AI.17726  Amount of Each Receipt this Period  50.00  Memo Item  Payroll Deduction (\$50 Bi-Weekly)
C. Melanie Kuehn  Mailing Address 4205 Persimmon Way  City Lake Charles  FEC ID number of contributing federal political committee.  Name of Employer LHC Group Receipt For:  Primary General Other (specify)	State Zip Code LA 70518  C  Occupation DVP  Aggregate Year-to-Date ▼  300.00	Date of Receipt    Mark
SUBTOTAL of Receipts This Page (optional)	·····	140.00
TOTAL This Period (last page this line numb	per only)	

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

FOR LINE NUMBER:					PAGE		7	OF	10
(check only one)									
>	X 11a 11b						12	2	
	13		14		15		16	6	17

or for commercial purposes, other than usin	g the name and address of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE O	GROUP EMPLOYEE FEDERAL POLIT	ICAL ACTION COMMITTEE INC					
Full Name (Last, First, Middle Initial)  Amy Laing  Mailing Address 238 Dogwood Springs La	ane	Date of Receipt					
City	State Zip Code	03 25 2016					
Mena	AR 71953	Transaction ID : SA11AI.17721  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer  LHC Group	Occupation State Market Developer	Memo Item     Payroll Deduction (\$40 Bi-Weekly)					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00						
Full Name (Last, First, Middle Initial)  Richard MacMillian  Mailing Address, 224 Door Park Trial	<u>'</u>	Date of Receipt					
Mailing Address 324 Deer Park Trial  City							
Lafayette	LA 70508	Transaction ID : SA11AI.17730  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	190.00					
Name of Employer	Occupation	Memo Item					
LHC Group	Legal Counsel	Payroll Deduction (\$190 Bi-Weekly)					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00						
Full Name (Last, First, Middle Initial)  C. Richard MacMillian	<u>'</u>	Date of Receipt					
Mailing Address 324 Deer Park Trial		03 25 2016					
City Lafayette	State Zip Code LA 70508	Transaction ID : SA11AI.17731  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	190.00					
Name of Employer  LHC Group	Occupation Legal Counsel	Memo Item Payroll Deduction (\$190 Bi-Weekly)					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00						
SUBTOTAL of Receipts This Page (optional	al)	420.00					
TOTAL This Period (last page this line num	nber only)						

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

FOR LINE NUMBER:						PAGE	:	8	OF	10	
	(check only one)										
	X 11a 11b					11c		12			
			13		14		15		16	;	17

or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GR	OUP EMPLOYEE FEDERAL POLITI	CAL ACTION COMMITTEE INC
Full Name (Last, First, Middle Initial)  A. Brach Myers  Mailing Address 201 Worth Ave.		Date of Receipt
City	State Zip Code	03 25 2016 Transaction ID : SA11AI.17723
Lafayette	LA 70508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	Memo Item
LHC Grooup	Vice President of Strategic Partnershi	Payroll Deduction (\$40 Bi-Weekly)
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial)  3. Keith Myers		Date of Receipt
Mailing Address 211 Morning Mist	03 25 2016	
City	State Zip Code	Transaction ID : SA11AI.17725
Sunset	LA 70584	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	Memo Item
The LHC Group	President/CEO	Payroll Deduction (\$40 Bi-Weekly)
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial)  C. Albert Simien		Date of Receipt
Mailing Address 111 Shadowbrook Lane		03 25 2016
City	State Zip Code	Transaction ID : SA11AI.17715
Youngsville	LA 70592	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.50
Name of Employer	Occupation	Memo Item
LGC Group	Director of Purchasing	Payroll Deduction (\$38.50 Bi-Weekly)
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	231.00	
SUBTOTAL of Receipts This Page (optional)		118.50
TOTAL This Period (last page this line numbe	r only)	

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

	FOR LINE NUMBER:						PAGE	9	OF	10
(check only one)										
	X 11a 11b				11c	12	!			
			13		14		15	16	;	17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.				
$\rangle$		UP EMPLOYEE FEDERAL POLITIC	CAL ACTION COMMITTEE INC				
Α.	Full Name (Last, First, Middle Initial) Harold Taylor		Date of Receipt				
	Mailing Address 252 Purple Dawn Drive		03 25 2016				
	City	State Zip Code LA 70584	Transaction ID : SA11AI.17717				
	Sunset	LA 70564	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	38.50				
	Name of Employer	Occupation	Memo Item				
	La. Home Care Group, Inc.	Director of Purchasing	Payroll Deduction (\$38.50 Bi-Weekly)				
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General  Other (specify) ▼	231.00					
В.	Full Name (Last, First, Middle Initial)  James Tobey	Date of Receipt					
	Mailing Address 465 Leo Avenue		03 11 _2016 _				
	City	State Zip Code	Transaction ID : SA11AI.17728				
	Shreveport	LA 71105	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer	Occupation	Memo Item				
	LHC Group	Director of Sales and Marketing	Payroll Deduction (\$50 Bi-Weekly)				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  C. James Tobey  Date of Receipt							
	Mailing Address 465 Leo Avenue		03 25 2016				
	City	State Zip Code	Transaction ID : SA11AI.17729				
	Shreveport	LA 71105	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer	Occupation	Memo Item				
	LHC Group	Director of Sales and Marketing	Payroll Deduction (\$50 Bi-Weekly)				
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	300.00					
	Other (specify) $\blacktriangledown$	300.00					
S	SUBTOTAL of Receipts This Page (optional)	300.00  ge (optional)					
т	TOTAL This Period (last page this line number only).						

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC  Full Name (Last, First, Middle Initial)  A. BENNET FOR COLORADO  Mailing Address PO BOX 3078  City  State  CO  80201  Transaction ID : S823.17736  Amount of Each Disbursement this Period  Candidate Name  Michael Bennet  Other (specify)  Full Name (Last, First, Middle Initial)  3. GEORGIANS FOR ISAKSON  Mailing Address POST OFFICE BOX 250116  City  State:  Zip Code  Artanta  GA  30325  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  Other (specify)  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  Other (specify)  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  Other (specify)  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  Other (specify)  Transaction ID : S823.17732  Amount of Each Disbursement this Period  Category/ Type  1000.00  Memo Item	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	\ <b>I</b> -	FOR LINE NUMBER: PAGE 10 OF 10 (check only one)	
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 Pul)  LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC  Full Name (Last, First, Middle Initial)  A. BENNET FOR COLORADO  Malling Address PO BOX 3078  City State Zip Code CO 80201  Purpose of Disbursement Donation  Candidate Name  Michael Bennet  City State Disbursement For: 2016  City State: District:  Full Name (Last, First, Middle Initial)  3. GEORGIANS FOR ISAKSON  Malling Address POST OFFICE BOX 250116  City State Zip Code General President Donation  Candidate Name  JOHN HARDY SAKSON  Malling Address POST OFFICE BOX 250116  City State: Disbursement Donation  Candidate Name  JOHN HARDY SAKSON  Malling Address POST OFFICE BOX 250116  City State: GA Disbursement Donation  Candidate Name  JOHN HARDY SAKSON  Malling Address POST OFFICE BOX 250116  City State: GA Disbursement Donation  Candidate Name  JOHN HARDY SAKSON  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House President  State: GA District: 00  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Memo Item  Memo Item  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House President  Disbursement For: Senate Primary General Primary	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23 🔲 24 🔲 25 🖂 26	
NAME OF COMMITTEE (In Full)  LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC  Full Name (Last, First, Middle Initial)  ABENNET FOR COLORADO  Mailing Address PO BOX 3078  City DENVER CO 80201  Purpose of Disbursement Disfrict:  Full Name (Last, First, Middle Initial)  3 GEORGIANS FOR ISAKSON  Mailing Address POST OFFICE BOX 250116  City State:  Disfrict:  Full Name (Last, First, Middle Initial)  3 GEORGIANS FOR ISAKSON  Mailing Address POST OFFICE BOX 250116  City State:  Disfrict:  Full Name (Last, First, Middle Initial)  Candidate Name  JOHN HARDY ISAKSON  Office Sought:  House President State:  Disbursement For: Category' Type  Office Sought:  House President State:  Office Sought:  House President  Office Sought:  Mamount of Each Disbursement this Period  Amount of Each Disbursement this Period  Memoltem					
A BENNET FOR COLORADO  Mailing Address PO BOX 3078  City	NAME OF COMMITTEE (In Full) LOUISIANA HEALTH CARE GROUP				
Mailing Address PO BOX 3078  City State Zip Code DENVER CO 80201  Purpose of Disbursement Donation Candidate Name Michael Bennet Office Sought: House Senate President Donation State: District:  Full Name (Last, First, Middle Initial) 3.  City State Zip Code Category/ Type  Office Sought: House President State: GA Disbursement For: 2016  City State Zip Code GA 30325  City State Zip Code GA 30325  Furpose of Disbursement Donation Office Sought: House President State: GA Disbursement For: 2016  Candidate Name (Last, First, Middle Initial) 3.  Category/ Type  Date of Disbursement  Other (specify) ▼  Transaction ID: SB23.17736  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB23.17732  Amount of Each Disbursement this Period Memoltem  Transaction ID: SB23.17732  Amount of Each Disbursement Initial District: Other (specify) ▼  Date of Disbursement District: Other (specify) ▼  Date of Disbursement Initial District: Other (specify) ▼  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Date of Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify) ▼  Amount of Each Disbursement Initial District: Other (specify)	_			Data of Dishursoment	
Mailing Address PO BOX 3078   03	BENNET FOR COLORADO				
DENVER Purpose of Disbursement Donation  Cardidate Name Michael Bennet  Office Sought: House Senate President State: Disbursement For: 2016  City State Zip Code Amount of Each Disbursement His Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Other (specify) ▼  Transaction ID: SB23.17736  Amount of Each Disbursement tem  Date of Disbursement  Date of Disbursement Inis Period  Type  Memo Item  Amount of Each Disbursement Inis Period  Date of Disbursement  Date of Disb	Mailing Address PO BOX 3078			03 31 2016	
DENVER Purpose of Disbursement Donation  Candidate Name  Michael Bennet  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement  Category/ Type  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement Ibis Period  Candidate Name  JOHN HARDY ISAKSON  Full Name (Last, First, Middle Initial)  Senate   President   Senate   Primary   General   General   Disbursement Ibis Period  Candidate Name  JOHN HARDY ISAKSON  Full Name (Last, First, Middle Initial)  Candidate Name  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Category/ Type  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Category/ Type  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Category/ Type  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Category/ Type  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House   Disbursement For: 2016   Memo Item  Date of Disbursement Ibis Period  Office Sought: House				Transaction ID : SB23 17736	
Donation Candidate Name Michael Bennet Office Sought: House Senate President State: District: House Senate President State: Senate President State: Senate President State: District: House Senate President State: District: District: Amount of Each Disbursement For: 2016  City State Zip Code ATLANTA GA 30325 Purpose of Disbursement Donation Office Sought: House President State: GA District: Other (specify) Primary General President State: GA District: Other (specify) Amount of Each Disbursement To: 2016  City State Zip Code ATLANTA GA 30325  Purpose of Disbursement For: 2016  Primary General President State: GA District: Other (specify) Amount of Each Disbursement To: 2016  City State Zip Code  Purpose of Disbursement For: 2016  Amount of Each Disbursement this Period Disbursement For: 2016  Amount of Each Disbursement To: 2016  Amount of Each Disbursement Interpretation Interpret		CO 80201		1141134611611 15 : GB26.11766	
Michael Bennet  Office Sought: House Senate President State: District: District: President State: District: District: President State: District: District: President State: District: President State: District: Distri				Amount of Each Disbursement this Period	
Michael Bennet Office Sought:	Candidate Name		Category/	4000.00	
Senate				1000.00	
Full Name (Last, First, Middle Initial)  3. GEORGIANS FOR ISAKSON  Mailing Address POST OFFICE BOX 250116  City State Zip Code ATLANTA GA 30325  Purpose of Disbursement Donation  Candidate Name JOHN HARDY ISAKSON  Office Sought: House President President State: City State Zip Code  Purpose of Disbursement For: 2016  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House City State Zip Code  Purpose of Disbursement For: 2016  Amount of Each Disbursement Initial)  Date of Disbursement Initial Disbursement For: 2016  Amount of Each Disbursement Initial Date of Date of Date of Disbursement Initial D	Senate President	Primary General		Memo Item	
Amount of Each Disbursement  Date of Disbursement this Period  Date of Disbursement  Date of Disbursement this Period  Date of Disbursement					
Mailing Address POST OFFICE BOX 250116   03 31 2016	_			Date of Disbursement	
ATLANTA GA 30325  Purpose of Disbursement Donation  Candidate Name  JOHN HARDY ISAKSON  Office Sought: House Senate President State: GA District: 00  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Office Sought: House Primary General Office Sought: Other (specify)  Senate Primary General Office Sought: Other (specify)   State: District: Other (	Mailing Address POST OFFICE BOX 250116				
ATLANTA GA 30325  Purpose of Disbursement Donation  Candidate Name  JOHN HARDY ISAKSON  Office Sought: House Senate President State: GA District: 00  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Office Sought: House Primary General Office Sought: Other (specify)  Senate Primary General Office Sought: Other (specify)   State: District: Other (	City	State Zip Code			
Donation  Candidate Name  JOHN HARDY ISAKSON  Office Sought: House President President State: GA District: 00  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Disbursement For: Category/Type  Amount of Each Disbursement this Period  Memo Item  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/Type  Office Sought: House Primary General Other (specify) Memo Item  Amount of Each Disbursement this Period  Category/Type  Memo Item	•			Transaction ID : SB23.17732	
JOHN HARDY ISAKSON  Office Sought: House			011	Amount of Each Disbursement this Period	
Office Sought: House Senate Primary General State: GA District: 00  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period Memo Item  Amount of Each Disbursement this Period Memo Item  Amount of Each Disbursement this Period Other (specify) ▼  State: District: Other (specify) ▼			Category/	1000.00	
State: GA District: 00  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)   State: District:  State: District:   Primary General Other (specify)   Other (specify)   Amount of Each Disbursement this Period   Memo Item  State: District:				1000.00	
Full Name (Last, First, Middle Initial)  Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Date of Disbursement  Amount of Each Disbursement this Period  Memo Item	Senate President	Primary General		Memo Item	
Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Primary General Other (specify) ▼  State: District:					
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  President Other (specify)  State: District:	C.				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Amount of Each Disbursement this Period  Memo Item	Mailing Address			M = M / D = D / Y = Y = Y	
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Amount of Each Disbursement this Period  Memo Item	City	State Zip Code			
Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:   Category/ Type  Memo Item	Purpose of Disbursement				
Office Sought: House Senate Primary General Other (specify) ▼  State: District: Memo Item	Candidate Name				
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General			
	SUBTOTAL of Disbursements This Page (ontional)			2000.00	
	COLIGINAL OF DISDUISCINGTION THIS I age (optional)				