

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 420 W. Pinhook Road Suite A LAFAYETTE LA 70503 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00382796 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 / 01 / 2017 through 05 / 31 / 2017

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

Type or Print Name of Treasurer

Signature of Treasurer Simien, Albert, , , [Electronically Filed] Date 06 / 19 / 2017

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

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="12063.59"/>	<input type="text" value="12063.59"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17069.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2487.92"/>	<input type="text" value="17494.32"/>
(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="19557.91"/>	<input type="text" value="29557.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3500.00"/>	<input type="text" value="13500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16057.91"/>	<input type="text" value="16057.91"/>
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

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1634.00	4255.00
(ii) Unitemized	853.92	8239.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2487.92	12494.22
(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)	2487.92	12494.22
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	0.10
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2487.92	17494.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2487.92	17494.32

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.....	3500.00	13500.00
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)) ..	3500.00	13500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500.00	13500.00

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)	2487.92	12494.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2487.92	12494.22
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	0.10
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	- 0.10

**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 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Begnaud, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Bellevue Plantation Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP-Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19488
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Begnaud, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Bellevue Plantation Road
 City Lafayette State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP-Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19489
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Duhon, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19504
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Duhon, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10429 Rue de Duhon
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19505
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

B. Dupree, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Hwy 132
 City Delhi State LA Zip Code 71232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19506
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

C. Dupree, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Hwy 132
 City Delhi State LA Zip Code 71232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19507
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Fontenot, Lessley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2303 sandalwood Drive
 City Lafayette State LA Zip Code 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19490
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Fontenot, Lessley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2303 sandalwood Drive
 City Lafayette State LA Zip Code 70570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Area Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19491
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Fox, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Summerland Key Lane
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) SVP Facility Based Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19492
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Fox, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Summerland Key Lane
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) SVP Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19493
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Gray, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19508
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

C. Gray, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Operation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19509
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction (\$30 Bi-Weekly)

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 10 OF 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Hengst, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Earth Wood Court
 City Louisville State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Sr. VP of Community Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19494
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Hengst, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Earth Wood Court
 City Louisville State KY Zip Code 40245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Sr. VP of Community Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19495
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Hollier, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 95
 City Opleousas State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Louisiana Health Care Group, I Occupation (for Individual) Legal Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19496
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hollier, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 95
 City Opleousas State LA Zip Code 70571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Louisiana Health Care Group, I Occupation (for Individual) Legal Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19497
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

B. Indest, Zachary, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) ViP of Clinical Intergration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19498
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Indest, Zachary, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) ViP of Clinical Intergration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19499
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Kuehn, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 Persimmon Way
 City Lake Charles State LA Zip Code 70518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19522
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

B. Kuehn, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 Persimmon Way
 City Lake Charles State LA Zip Code 70518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19523
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

C. Laing, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 Dogwood Springs Lane
 City Mena State AR Zip Code 71953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Market Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19514
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Laing, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 Dogwood Springs Lane
 City Mena State AR Zip Code 71953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) State Market Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19515
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Lege, Jude, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13806 Elk Road
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) Directors of Nursing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19500
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Lege, Jude, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13806 Elk Road
 City Abbeville State LA Zip Code 70510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Occupation (for Individual) Directors of Nursing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19501
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Little, JoAnne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Groups Occupation (for Individual) Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19516
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Little, JoAnne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Hugh Wallis Road, S
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Groups Occupation (for Individual) Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19517
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. MacMillian, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Deer Park Trial
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1710.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19526
 Amount of Each Receipt this Period 190.00
 Memo Item
 Payroll Deduction (\$190 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	270.00
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 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. MacMillian, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Deer Park Trial
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19527
 Amount of Each Receipt this Period 190.00
 Memo Item
 Payroll Deduction (\$190 Bi-Weekly)

B. Myers, Brach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Worth Ave.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Vice President of Strategic Partnershi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19518
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. Myers, Brach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Worth Ave.
 City Lafayette State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Grooup Occupation (for Individual) Vice President of Strategic Partnershi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19519
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	270.00
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 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Myers, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Morning Mist
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19520
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

B. Myers, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Morning Mist
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The LHC Group Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19521
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction (\$40 Bi-Weekly)

C. Simien, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LGC Group Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 346.50

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19510
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	118.50
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 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Simien, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Shadowbrook Lane
 City Youngsville State LA Zip Code 70592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LGC Group Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19511
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

B. Simmons, Kermit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Rue Christopher Crossing
 City Natchitoches State LA Zip Code 71457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP of Facility Based Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19502
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

C. Simmons, Kermit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Rue Christopher Crossing
 City Natchitoches State LA Zip Code 71457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) DVP of Facility Based Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19503
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction (\$25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	88.50
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 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Taylor, Harold, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 Purple Dawn Drive
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) La. Home Care Group, Inc. Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.50

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19512
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

B. Taylor, Harold, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 Purple Dawn Drive
 City Sunset State LA Zip Code 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) La. Home Care Group, Inc. Occupation (for Individual) Director of Purchasing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 10 / 2017
Transaction ID : SA11AI.19513
 Amount of Each Receipt this Period 38.50
 Memo Item
 Payroll Deduction (\$38.50 Bi-Weekly)

C. Tobey, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 Leo Avenue
 City Shreveport State LA Zip Code 71105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LHC Group Occupation (for Individual) Director of Sales and Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 05 / 2017
Transaction ID : SA11AI.19524
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	127.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 25
(check only one)

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

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

A. Tobey, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 465 Leo Avenue

City Shreveport	State LA	Zip Code 71105
--------------------	-------------	-------------------

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

Name of Employer (for Individual) LHC Group	Occupation (for Individual) Director of Sales and Marketing
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	10	/	2017

Transaction ID : SA11AL19525

Amount of Each Receipt this Period
50.00

Memo Item
Payroll Deduction (\$50 Bi-Weekly)

B.
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	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

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	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	1634.00

**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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. BILIRAKIS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 606

City TARPON SPRINGS State FL Zip Code 34688

Purpose of Disbursement Donation

Candidate Name **BILIRAKIS FOR CONGRESS**

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

State: FL District: 12

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00408534
Transaction ID : SB23.19533
Amount of Each Disbursement this Period: 156.25

Memo Item

B. BILLY LONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3246 E RIDGEVIEW ST

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement Donation

Candidate Name **LONG, BILLY MR., , ,**

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

State: MO District: 07

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00460063
Transaction ID : SB23.19540
Amount of Each Disbursement this Period: 156.25

Memo Item

C. BUCSHON FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement Donation

Candidate Name **BUCSHON, LARRY D., , ,**

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

State: IN District: 08

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00468256
Transaction ID : SB23.19542
Amount of Each Disbursement this Period: 156.25

Memo Item

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

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

0.00

**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)

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. BUDDY CARTER FOR CONGRESS

Mailing Address PO BOX 10570

City
SAVANNAH

State
GA

Zip Code
31412

Purpose of Disbursement
Donation

011

Category/
Type

Candidate Name

CARTER, EARL LEROY, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: GA

District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

FEC Identification Number

C C00543967

Transaction ID : SB23.19576

Amount of Each Disbursement this Period

156.25

Memo Item

Full Name (Last, First, Middle Initial)

B. COLLINGS FOR CONGRESS

Mailing Address 23 CAMEO DR

City
NASHVILLE

State
TN

Zip Code
37211

Purpose of Disbursement
Donation

011

Category/
Type

Candidate Name

COLLINS, CHRISTOPHER C, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: NY

District: 27

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

FEC Identification Number

C C00463430

Transaction ID : SB23.19545

Amount of Each Disbursement this Period

156.25

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SUSAN BROOKS

Mailing Address 9425 N MERIDIAN ST
237

City
INDIANAPOLIS

State
IN

Zip Code
46260

Purpose of Disbursement
Donation

011

Category/
Type

Candidate Name

BROOKS, SUSAN, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CA

District: 36

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

FEC Identification Number

C C00500207

Transaction ID : SB23.19548

Amount of Each Disbursement this Period

156.25

Memo Item

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

0.00

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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. GUTHRIE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement Donation

Candidate Name GUTHRIE, S. BRETT HON., , ,

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

State: KY District: 02

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00445023
Transaction ID : SB23.19551
Amount of Each Disbursement this Period: 156.25

Memo Item

B. HEALTH FIRST COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement Donation

Candidate Name

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

State: District:

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00624841
Transaction ID : SB23.19530
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. HUDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement Donation

Candidate Name HUDSON, RICHARD L. JR., , ,

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

State: NC District: 08

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00504522
Transaction ID : SB23.19573
Amount of Each Disbursement this Period: 156.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2500.00

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)

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. LANCE FOR CONGRESS

Mailing Address PO BOX 999

City EDISON State NJ Zip Code 08818

Purpose of Disbursement Donation

011
Category/Type

Candidate Name LANCE, LEONARD, , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: NJ District: 07

Date of Disbursement
 M M / D D / Y Y Y Y Y
 05 / 12 / 2017

FEC Identification Number
 C C00444224
Transaction ID : SB23.19554
 Amount of Each Disbursement this Period
 156.25

Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA BLACKBURN FOR CONGRESS, INC.

Mailing Address PO BOX 3750

City BRENTWOOD State TN Zip Code 37024

Purpose of Disbursement Donation

011
Category/Type

Candidate Name BLACKBURN, MARSHA MRS., , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: TN District: 07

Date of Disbursement
 M M / D D / Y Y Y Y Y
 05 / 12 / 2017

FEC Identification Number
 C C00376939
Transaction ID : SB23.19557
 Amount of Each Disbursement this Period
 156.25

Memo Item

Full Name (Last, First, Middle Initial)

C. MORGAN GRIFFITH FOR CONGRESS

Mailing Address PO BOX 361

City CHRISTIANSBURG State VA Zip Code 24068

Purpose of Disbursement Donation

011
Category/Type

Candidate Name GRIFFITH, H MORGAN, , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: VA District: 09

Date of Disbursement
 M M / D D / Y Y Y Y Y
 05 / 12 / 2017

FEC Identification Number
 C C00477240
Transaction ID : SB23.19560
 Amount of Each Disbursement this Period
 156.25

Memo Item

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

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

0.00

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)

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. MULLIN FOR CONGRESS

Mailing Address PO BOX 3681

City
MUSKOGEE

State
OK

Zip Code
74402

Purpose of Disbursement
Donation

011
Category/
Type

Candidate Name

MULLIN, MARKWAYNE MR., , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OK District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2017

FEC Identification Number

C C00498345

Transaction ID : SB23.19570

Amount of Each Disbursement this Period

156.25

Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH ABRAHAM FOR CONGRESS

Mailing Address P.O. BOX 270

City
ARCHIBALD

State
LA

Zip Code
71218

Purpose of Disbursement
Donation

011
Category/
Type

Candidate Name

ABRAHAM, RALPH LEE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: LA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

FEC Identification Number

C C00563940

Transaction ID : SB23.19529

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THE CONGRESSMAN JOE BARTON COMMITTEE

Mailing Address P.O. BOX 1444

City
ENNIS

State
TX

Zip Code
75120

Purpose of Disbursement
Donation

011
Category/
Type

Candidate Name

BARTON, JOE LINUS, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2017

FEC Identification Number

C C00195065

Transaction ID : SB23.19564

Amount of Each Disbursement this Period

156.25

Memo Item

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

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

1000.00

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**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)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. TIM MURPHY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 24551

City PTTSBURGH State PA Zip Code 15234

Purpose of Disbursement Donation

Candidate Name MURPHY, TIMOTHY, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: PA District: 18

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00372201
Transaction ID : SB23.19561
Amount of Each Disbursement this Period: 156.25

Memo Item

B. UPTON FOR ALL OF US

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 490

City ST. JOSEPH State MI Zip Code 49085

Purpose of Disbursement Donation

Candidate Name UPTON, FREDERICK STEPHEN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 06

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C H6MI04113
Transaction ID : SB23.19566
Amount of Each Disbursement this Period: 156.25

Memo Item

C. VOLUNTEERS FOR SHIMKUS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 661

City COLLINSVILLE State IL Zip Code 62234

Purpose of Disbursement Donation

Candidate Name SHIMKUS, JOHN M, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 15

Date of Disbursement: 05 / 12 / 2017

FEC Identification Number: C00258855
Transaction ID : SB23.19567
Amount of Each Disbursement this Period: 156.25

Memo Item

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

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

0.00
3500.00