

COMMITTEE'S REPORT

(filed by committees that support or oppose one or more candidates and/or propositions and that are not candidate committees)

1. Full Name and Address of Political Committee

LOUISIANA NURSING HOME POLITICAL ACTION COMMITTEE
7844 Office Park Boulevard
Baton Rouge, LA 70809

OFFICE USE ONLY

Report Number: 88341

Date Filed: 4/30/2020

Report Includes Schedules:

Schedule A-1

Schedule A-3



2. Date of Primary

Monthly

This report covers from 4/1/2020 through 4/30/2020

3. Type of Report:

<input type="checkbox"/> 180th day prior to primary	<input type="checkbox"/> 40th day after general
<input type="checkbox"/> 90th day prior to primary	<input type="checkbox"/> Annual (future election)
<input type="checkbox"/> 30th day prior to primary	<input checked="" type="checkbox"/> Monthly
<input type="checkbox"/> 10th day prior to primary	
<input type="checkbox"/> 10th day prior to general	<input type="checkbox"/> Amendment to prior

4. All Committee Officers (including Chairperson, Treasurer, if any, and any other committee officers)

a. Name

b. Position

c. Address

RONALD A GOUX

Chairperson

P.O. Box 1429

Mandeville, LA 70470

PHYLLIS CHATELAIN

Treasurer

P.O. Drawer 320

New Roads, LA 70760

5. Candidates or Propositions the Committee is Supporting or Opposing (use additional sheets if necessary)

a. Name & Address of Candidate/Description of Proposition

b. Office Sought

c. Political Party

d. Support/Oppose

6. Is the Committee supporting the entire ticket of a political party?

Yes

☒ No

If "yes", which party?

7. a. Name of Person Preparing Report

MARK BERGER

b. Daytime Telephone

225-927-5642

8. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 30th day of April, 2020.

Ronald A Goux

Signature of Committee/Chairperson

985-626-1900

Daytime Telephone

Phyllis Chatelain

Signature of Committee Treasurer, if any

225-638-4404

Daytime Telephone

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	\$ 37,000.00
2. In-kind Contributions (Schedule A-2)	\$ 0.00
3. Campaign paraphernalia sales of \$25 or less	\$ 0.00
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +3)	\$ 37,000.00
5. Other Receipts (Schedule A-3)	\$ 500.00
6. Loans Received (Schedule B)	\$ 0.00
7. Loan Repayments Received (Schedule D)	\$ 0.00
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	\$ 37,500.00

DISBURSEMENTS	This Period
9. General Expenditures (Schedule E-1)	\$ 0.00
10. In-Kind Expenditures (Schedule E-2)	\$ 0.00
11. Contributions made to Candidates (Schedule E-3)	\$ 0.00
12. TOTAL EXPENDITURES (Lines 9 + 10 + 11)	\$ 0.00
13. Other Disbursements (Schedule E-4)	\$ 0.00
14. Loan Repayments Made (Schedule B)	\$ 0.00
15. Funds Loaned (Schedule D)	\$ 0.00
16. TOTAL DISBURSEMENTS (Lines 12 + 13 + 14 + 15)	\$ 0.00

FINANCIAL SUMMARY	Amount
17. Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or -0- if first report for this committee)	\$ 197,369.04
18. <i>Plus</i> total receipts this period (<i>less</i> in-kind contributions received) (Line 8 above minus line 2 above)	\$ 37,500.00
19. <i>Less</i> total disbursements this period (<i>less</i> in-kind expenditures) (Line 16 above minus line 10 above)	\$ 0.00
20. Funds on hand at close of reporting period	\$ 234,869.04

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SUMMARY PAGE (continued)

INVESTMENTS	Amount
21. Of funds on hand at beginning of reporting period (Line 17, above), amount held in investments (<i>i.e.</i> , savings accounts, CD's, money market funds, etc.)	\$ 0.00
22. Of funds on hand at close of reporting period (Line 20, above), amount held in investments	\$ 0.00

SPECIAL TRANSACTIONS	This Period
23. Contributions received from political committees (From Schedules A-1 and A-2)	\$ 0.00
24. All proceeds from the sale of tickets to fundraising events (Receipts from the sale of tickets are contributions and must also be reported on Schedule A-1)	\$ 0.00
25. Proceeds from the sale of campaign paraphernalia (Receipts from the sale of campaign paraphernalia are contributions and must also be reported on Schedule A-1 or Line 3 above)	\$ 0.00
26. Expenditures from petty cash fund (Must also be reported on Schedule E-1)	\$ 0.00

NOTICE

A political committee must register in each calendar year in which it will have over \$500 of financial activity. The registration is accomplished by filing a Statement of Organization form and paying the \$100 filing fee. Statements of Organization are filed annually by January 31. Any committee which realizes that it will have over \$500 of financial activity after January 31 must register within ten days of its realization of that fact. However, if this occurs during the ten day period prior to an election the Statement of Organization must be filed within three days.

Political committees must file reports of receipts and disbursements on an annual basis. Annual reports are due by February 15 and should cover the preceding calendar year. Also, committees must file reports of receipts and disbursements on the same schedule as the candidates it supports or opposes. Reports are also due in connection with propositions (ballot issues) the committee supports or opposes. Schedules of reporting and filing dates for all elections are available from the Campaign Finance Office.

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SCHEDULE A-1: CONTRIBUTIONS (Other than In-Kind Contributions)

The following information must be provided for all contributions **received** by the committee during this reporting period, except for in-kind contributions, whether received from a political committee or some other person or entity. Contributions **made** by the committee are reported on SCHEDULE E-3: CONTRIBUTIONS MADE TO CANDIDATES. Information on in-kind contributions is reported on SCHEDULE A-2: IN-KIND CONTRIBUTIONS. In Column 1, check "yes" if the contributor is a political committee and "no" if not. For anonymous contributions, see SCHEDULE F. Totals and subtotals at bottom of the page are *optional*. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
ACADIA ST. LANDRY GUEST HOME 830 S. Broadway St. Church Point, LA 70525 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,072.00	\$1,072.00
ARBORLAKE HEALTH CARE P.O. Box 206 Farmerville, LA 71241 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,200.00	\$1,200.00
ASSUMPTION HEALTHCARE & REHAB 252 Highway 402 Napoleonville, LA 70390 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$960.00	\$960.00
BASILE CARE CENTER 2907 E. Schambers Basile, LA 70515 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$624.00	\$624.00
CAPITOL HOUSE NURSING & REHAB 11546 Florida Blvd Baton Rouge, LA 70815 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,056.00	\$1,056.00
CARE CENTER OF DEQUINCY P.O. Box 1219 DeQuincy, LA 70633 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$640.00	\$640.00
4. SUBTOTAL (this page)		\$ 640.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)		\$ 0.00	TOTAL (complete only on last page of this schedule)

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1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
CHERRY RIDGE GUEST CARE 5980 Cherry Ridge Rd. Bastrop, LA 71220 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$880.00	\$880.00
COLONIAL NURSING HOME 426 N. Washington Marksville, LA 71351 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$512.00	\$512.00
COURTYARD MANOR 306 Sidney Martin Rd Lafayette, LA 70507 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$736.00	\$1,496.00
DERIDDER REHAB & RETIREMENT 1420 Blankenship Deridder, LA 70634 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$720.00	\$720.00
DESOTO RETIREMENT & REHAB 635 E. Schley St. Mansfield, LA 71052 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,080.00	\$1,080.00
FRANKLIN HEALTH CARE 1907 Chinaberry St. Franklin, LA 70538 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,216.00	\$1,216.00
4. SUBTOTAL (this page)		\$ 1,216.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)		\$ 0.00	TOTAL (complete only on last page of this schedule)

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1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
GOLDEN AGE OF WELSH 410 South Simmons St. Welsh, LA 70591 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$912.00	\$912.00
HESSMER NURSING HOME 3707 Hwy 114 Hessemer, LA 71341 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$736.00	\$736.00
JEFF DAVIS LIVING CENTER 1338 N. Cutting Ave. Jennings, LA 70546 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$960.00	\$960.00
KINDER RETIREMENT & REHAB CENTER P.O. Box 1270 Kinder, LA 70648 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$800.00	\$800.00
LAGNIAPPE HEALTHCARE 1408 Summerlin Ln Bastrop, LA 71220 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$896.00	\$896.00
LAKEVIEW MANOR NURSING HOME P.O. Drawer 320 New Roads, LA 70760 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$976.00	\$976.00
4. SUBTOTAL (this page)		\$ 976.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)		\$ 0.00	TOTAL (complete only on last page of this schedule)

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SCHEDULE A-1: CONTRIBUTIONS (Other than In-Kind Contributions)

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1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
LE GRANDE HEALTHCARE & REHAB P.O. Box 667 Bastrop, LA 71120 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,000.00	\$1,000.00
LEGACY NURSING AND REHAB PLAQUEMINE 59215 River West Dr. Plaquemine, LA 70764 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,208.00	\$1,208.00
LEGACY NURSING AND REHAB PORT ALLEN 403 North 16th St. Port Allen, LA 70767 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,000.00	\$1,000.00
LEGACY NURSING AND REHAB TALLULAH 32 Crothers Dr. Tallulah, LA 71282 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,248.00	\$1,248.00
LOUISIANA EXTENDED CARE HOSPITALS 2810 Ambassador Pkwy Lafayette, LA 70506 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$144.00	\$144.00
MAISON DE LAFAYETTE 2707 Kaliste Saloom Lafayette, LA 70508 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,512.00	\$1,512.00
4. SUBTOTAL (this page)		\$ 1,512.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)		\$ 0.00	TOTAL (complete only on last page of this schedule)

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SCHEDULE A-1: CONTRIBUTIONS (Other than In-Kind Contributions)

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1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
MANSFIELD NURSING CENTER P.O. Box 761 Mansfield, LA 71052 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$800.00	\$800.00
MORGAN CITY HEALTH CARE CENTER 740 Justa St. Morgan City, LA 70380 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$704.00	\$704.00
OAK LANE WELLNESS & REHAB 1400 West Magonlia Eunice, LA 70535 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,040.00	\$1,040.00
PONTCHARTRAIN HEALTH CARE CENTRE 1401 Highway 190 Mandeville, LA 70448 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,456.00	\$1,456.00
RIVER OAKS RETIREMENT CENTER 2500 E. Simcoe St. Lafayette, LA 70501 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$800.00	\$800.00
ROSEPINE RETIREMENT & REHAB P.O. Box 1169 Rosepine, LA 70659 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$864.00	\$864.00
4. SUBTOTAL (this page)		\$ 864.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)	\$ 0.00	TOTAL (complete only on last page of this schedule)	

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SCHEDULE A-1: CONTRIBUTIONS (Other than In-Kind Contributions)

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	a. Date(s)	b. Amount(s)	
SABINE RETIREMENT & REHAB 965 Fisher Rd Many, LA 71449 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$928.00	\$928.00
SAVOY CARE CENTER P.O. Box 515 Mamou, LA 70554 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$952.00	\$952.00
SHADY LAKE NURSING HOME P.O. Box 426 Lake Providence, LA 71254 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$864.00	\$864.00
ST. CHRISTINA NURSING & REHAB P.O. Box 4300 Pineville, LA 71361 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,120.00	\$1,120.00
ST. MARTINVILLE REHAB & NURSING CENTER 203 Claire Drive St. Martinville, LA 70582 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/30/2020	\$2,000.00	\$2,000.00
TOLEDO NURSING HOME P.O. Box 1009 Zwolle, LA 71486 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$640.00	\$640.00
4. SUBTOTAL (this page)		\$ 640.00	N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)		\$ 0.00	TOTAL (complete only on last page of this schedule)

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SCHEDULE A-1: CONTRIBUTIONS (Other than In-Kind Contributions)

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1. Name and Address of Contributor	2. Contributions this Reporting Period		3. Total this Year
	a. Date(s)	b. Amount(s)	
TRI-COMMUNITY NURSING CENTER 7014 Highway 71 Palmetto, LA 71358 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$864.00	\$864.00
WESTWOOD MANOR NURSING HOME 714 High School Dr. DeRidder, LA 70634 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$1,056.00	\$1,056.00
WOODS HAVEN SENIOR CITIZENS HOME P.O. Box 159 Pollock, LA 71467 POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>	04/27/2020	\$824.00	\$824.00
4. SUBTOTAL (this page)		\$ 3,384.00	N/A
5. TOTAL (complete only on last page of this schedule)		\$ 37,000.00	N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:			
SUBTOTAL (this page)	\$ 0.00	TOTAL (complete only on last page of this schedule)	\$ 0.00

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SCHEDULE A-3: OTHER RECEIPTS

This schedule is used to report those receipts that are not "contributions"; that is, monies received by the committee that are not paid to it for the purpose of supporting, opposing or otherwise influencing the nomination or election of candidates to public office or supporting or opposing propositions or questions submitted to the voters. Examples include interest or investment income. **Receipts should be reported on this schedule only if they have not been reported elsewhere in this report.** The explanation of the receipt should state the reason the payment was made to the committee.

1. Name and Address of Source	2. Explanation	3. Date	4. Amount
C.R. PERSICA, LLC P.O. Box 44500 Baton Rouge, LA 70804	Acadiana Delegation Legislative Assistant's event canceled. Check voided.	04/27/2020	\$500.00
5. Total OTHER RECEIPTS during this reporting period			\$ 500.00

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