

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

We The People of Arkansas

ADDRESS (number and street) 702 Glasgow Lane

Check if different than previously reported. (ACC)

Bentonville AR 72712

2. **FEC IDENTIFICATION NUMBER** C00479881

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input checked="" type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 03 31 2010 through 04 30 2010

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

Type or Print Name of Treasurer Mr. Joseph Conway Gammon

Signature of Treasurer Electronically Filed by Mr. Joseph Conway Gammon Date 05 25 2010

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

Office Use Only										FEC FORM 3X (Rev. 12/2004)
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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
We The People of Arkansas

Report Covering the Period: From:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	0.00									
(c) Total Receipts (from Line 19)	2689.00	2689.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2689.00	2689.00								
7. Total Disbursements (from Line 31)	2960.30	2960.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	-271.30	-271.30								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2686.42									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
We The People of Arkansas

Report Covering the Period: From:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	0.00	0.00
(ii) Unitemized	289.00	289.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	289.00	289.00
(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)	289.00	289.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	2400.00	2400.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	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 Transfer (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))	2689.00	2689.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2689.00	2689.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	486.07	486.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	486.07	486.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	2474.23	2474.23
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2960.30	2960.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2960.30	2960.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	289.00	289.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	289.00	289.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	486.07	486.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	486.07	486.07

**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 / 24
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input checked="" 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)
We The People of Arkansas

A.	Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 702 Glasgow Lane		Transaction ID: SA13.4124
	City	State	Zip Code
	Bentonville	AR	72712
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00
Name of Employer Wal-Mart Stores, Inc		Occupation Manager	12 month loan for Advertising and Administrative Expenses
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon		Date of Receipt MM / DD / YYYY 04 / 06 / 2010
	Mailing Address 702 Glasgow Lane		Transaction ID: SA13.4125
	City	State	Zip Code
	Bentonville	AR	72712
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Wal-Mart Stores, Inc		Occupation Manager	12 month loan for Advertising and Administrative Expenses
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1900.00	

C.	Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon		Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 702 Glasgow Lane		Transaction ID: SA13.4126
	City	State	Zip Code
	Bentonville	AR	72712
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Wal-Mart Stores, Inc		Occupation Manager	12 month loan for Advertising and Administrative Expenses
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2400.00
TOTAL This Period (last page this line number only)	▶	2400.00

**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)

PAGE 7 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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)
We The People of Arkansas

A.

Full Name (Last, First, Middle Initial)
Williams & Hutchinson

Transaction ID: SB21B.4303
Date of Disbursement

Mailing Address 5417 Pinnacle Point Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	0

City State Zip Code
Rogers AR 72758

Amount of Each Disbursement this Period

315.00

Purpose of Disbursement
Legal Services

001
Category/ Type

Candidate Name
We The People of Arkansas

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

315.00

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

315.00

SCHEDULE C (FEC Form 3X)

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

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FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
We The People of Arkansas

Transaction ID: SC/10.4124

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 702 Glasgow Lane	
City Bentonville State AR ZIP Code 72712	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
900.00	0.00	900.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>3</td></tr> </table>	M	M	0	3	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>3</td><td>1</td></tr> </table>	D	D	3	1	<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	Y	Y	Y	Y	2	0	1	0	3/31/2011
M	M																		
0	3																		
D	D																		
3	1																		
Y	Y	Y	Y																
2	0	1	0																
		10.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="900.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

PAGE 9 / 24
FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
We The People of Arkansas

Transaction ID: SC/10.4125

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 702 Glasgow Lane	
City Bentonville State AR ZIP Code 72712	

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YY YY 04 06 2010	Date Due 4/6/2011	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------------------	--------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="1000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
We The People of Arkansas

Transaction ID: SC/10.4126

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr Joseph C. Gammon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 702 Glasgow Lane	
City Bentonville State AR ZIP Code 72712	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 4 D D 2 7 Y Y Y Y 2 0 1 0	4/27/2010	10.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="500.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="2400.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
We The People of Arkansas

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mr. Joseph Conway Gammon

Nature of Debt (Purpose):
Advance from personal funds for website services to be reimbursed.

Mailing Address 702 Glasgow Lane

City	State	ZIP Code
Bentonville	AR	72712

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4290

Amount Incurred This Period

286.42

Payment This Period

0.00

Outstanding Balance at Close of This Period

286.42

1) **SUBTOTALS** This Period This Page (optional)..... ▶

286.42

2) **TOTALS** This Period (last page this line number only)..... ▶

286.42

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

2400.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

2686.42

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
AL8 BP

Mailing Address

City Bentonville	State AR	Zip Code 72712
---------------------	-------------	-------------------

Purpose of Expenditure Advertising	Category/ Type 004
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	935.28
---	--------

Date
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Amount
5.59

Transaction ID: SE.4145

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Mailing Address
2107 S Walton Blvd
Suite C

City Bentonville	State AR	Zip Code 72712
---------------------	-------------	-------------------

Purpose of Expenditure Advertising: Printing And Reproduction	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	779.88
---	--------

Date
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount
300.00

Transaction ID: SE.4138

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	305.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Mailing Address
2107 S Walton Blvd
Suite C

City Bentonville	State AR	Zip Code 72712
---------------------	-------------	-------------------

Purpose of Expenditure Advertising:Printing And Reproduction	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	790.78
---	--------

Date
M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 1 0

Amount
10.90

Transaction ID: SE.4142

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Mailing Address
2107 S Walton Blvd
Suite C

City Bentonville	State AR	Zip Code 72712
---------------------	-------------	-------------------

Purpose of Expenditure Advertising:Printing And Reproduction	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1507.66
---	---------

Date
M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 0

Amount
520.39

Transaction ID: SE.4151

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	531.29
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Date
M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 0

Mailing Address
2107 S Walton Blvd
Suite C

Amount
51.78

City State Zip Code
Bentonville AR 72712

Transaction ID: SE.4158

Purpose of Expenditure
Advertising:Printing
And Reproduction
Category/Type 004

Office Sought: House State: AR
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1727.35

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Date
M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Mailing Address
2107 S Walton Blvd
Suite C

Amount
27.25

City State Zip Code
Bentonville AR 72712

Transaction ID: SE.4161

Purpose of Expenditure
Advertising:Printing
And Reproduction
Category/Type 004

Office Sought: House State: AR
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1801.63

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	79.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Mailing Address
2107 S Walton Blvd
Suite C

City	State	Zip Code
Bentonville	AR	72712

Purpose of Expenditure Advertising:Printing And Reproduction	Category/ Type	004
--	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1957.82
---	---------

Date
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Amount
42.51

Transaction ID: SE.4168

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Arkansas Sign & Banner

Mailing Address
2107 S Walton Blvd
Suite C

City	State	Zip Code
Bentonville	AR	72712

Purpose of Expenditure Advertising:Printing And Reproduction	Category/ Type	004
--	-------------------	-----

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	2159.52
---	---------

Date
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Amount
141.70

Transaction ID: SE.4173

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	184.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook.com

Mailing Address
156 University Ave

City Palo Alto	State CA	Zip Code 94301-1605
-------------------	-------------	------------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1831.63
--	---------

Date
MM / DD / YYYY
04 / 15 / 2010

Amount
30.00

Transaction ID: SE.4162

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Facebook.com

Mailing Address
156 University Ave

City Palo Alto	State CA	Zip Code 94301-1605
-------------------	-------------	------------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1915.31
--	---------

Date
MM / DD / YYYY
04 / 20 / 2010

Amount
31.27

Transaction ID: SE.4167

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	61.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook.com

Mailing Address
156 University Ave

City Palo Alto	State CA	Zip Code 94301-1605
-------------------	-------------	------------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1987.82
--	---------

Date
MM / DD / YYYY
04 / 23 / 2010

Amount
30.00

Transaction ID: SE.4171

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Facebook.com

Mailing Address
156 University Ave

City Palo Alto	State CA	Zip Code 94301-1605
-------------------	-------------	------------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	2017.82
--	---------

Date
MM / DD / YYYY
04 / 26 / 2010

Amount
30.00

Transaction ID: SE.4172

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	60.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Facebook.com

Mailing Address
156 University Ave

City Palo Alto	State CA	Zip Code 94301-1605
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Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	2187.81
--	---------

Date
MM / DD / YYYY
04 / 30 / 2010

Amount
28.29

Transaction ID: SE.4174

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
GoDaddy.com

Mailing Address
14455 N Hayden Rd
Suite 219

City Scottsdale	State AZ	Zip Code 85260
--------------------	-------------	-------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	286.42
--	--------

Date
MM / DD / YYYY
03 / 31 / 2010

Amount
286.42

Transaction ID: SE.4127

Office Sought: House State: AR
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	314.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
GoDaddy.com

Mailing Address
14455 N Hayden Rd
Suite 219

City Scottsdale	State AZ	Zip Code 85260
--------------------	-------------	-------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1554.69
--	---------

Date
MM / DD / YYYY
04 / 12 / 2010

Amount
47.03

Transaction ID: SE.4152

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
GoDaddy.com

Mailing Address
14455 N Hayden Rd
Suite 219

City Scottsdale	State AZ	Zip Code 85260
--------------------	-------------	-------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1624.72
--	---------

Date
MM / DD / YYYY
04 / 13 / 2010

Amount
57.02

Transaction ID: SE.4156

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	104.05
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
GoDaddy.com

Mailing Address
14455 N Hayden Rd
Suite 219

City Scottsdale	State AZ	Zip Code 85260
--------------------	-------------	-------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1737.35
--	---------

Date
MM / DD / YYYY
04 / 14 / 2010

Amount
10.00

Transaction ID: SE.4159

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
GoDaddy.com

Mailing Address
14455 N Hayden Rd
Suite 219

City Scottsdale	State AZ	Zip Code 85260
--------------------	-------------	-------------------

Purpose of Expenditure Advertising:Website Services	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1774.38
--	---------

Date
MM / DD / YYYY
04 / 14 / 2010

Amount
37.03

Transaction ID: SE.4160

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	47.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Lowe's Improvement Center

Mailing Address
300 North 46th St

City Rogers	State AR	Zip Code 72756
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Purpose of Expenditure Advertising	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	929.69
---	--------

Date
MM / DD / YYYY
04 / 09 / 2010

Amount
138.91

Transaction ID: SE.4143

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Lowe's Improvement Center

Mailing Address
300 North 46th St

City Rogers	State AR	Zip Code 72756
----------------	-------------	-------------------

Purpose of Expenditure Advertising	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	987.27
---	--------

Date
MM / DD / YYYY
04 / 10 / 2010

Amount
51.99

Transaction ID: SE.4147

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	190.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Lowe's Improvement Center

Mailing Address
300 North 46th St

City Rogers	State AR	Zip Code 72756
----------------	-------------	-------------------

Purpose of Expenditure Advertising	Category/ Type 004
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1675.57
---	---------

Date
MM / DD / YYYY
04 / 13 / 2010

Amount
50.85

Transaction ID: SE.4157

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Scooter Promotions

Mailing Address
5801 Corsica Rd

City Corpus Christi	State TX	Zip Code 78414
------------------------	-------------	-------------------

Purpose of Expenditure Advertising:Printing And Reproduction	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	479.88
---	--------

Date
MM / DD / YYYY
03 / 31 / 2010

Amount
479.88

Transaction ID: SE.4134

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	530.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart

Mailing Address

City: Bentonville State: AR Zip Code: 72712

Purpose of Expenditure: Advertising Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought: 1567.70

Date: 04 / 12 / 2010

Amount: 13.01

Transaction ID: SE.4154

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart

Mailing Address

City: Bentonville State: AR Zip Code: 72712

Purpose of Expenditure: Advertising Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought: 1849.20

Date: 04 / 15 / 2010

Amount: 17.57

Transaction ID: SE.4164

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	30.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date: 05 / 25 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) We The People of Arkansas	FEC IDENTIFICATION NUMBER C C00479881
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart

Mailing Address

City Bentonville	State AR	Zip Code 72712
---------------------	-------------	-------------------

Purpose of Expenditure Advertising	Category/ Type 004
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1853.56
---	---------

Date
MM / DD / YYYY
04 / 15 / 2010

Amount
4.36

Transaction ID: SE.4165

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Wal-Mart

Mailing Address

City Bentonville	State AR	Zip Code 72712
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Purpose of Expenditure Advertising	Category/ Type 004
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
BLANCHE L LINCOLN

Calendar Year-To-Date Per Election for Office Sought	1884.04
---	---------

Date
MM / DD / YYYY
04 / 15 / 2010

Amount
30.48

Transaction ID: SE.4166

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	34.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2474.23

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Joseph Conway Gammon
Signature

Date MM / DD / YYYY
05 / 25 / 2010