

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.
French Hill for Arkansas

ADDRESS (number and street)
 Check if different than previously reported. (ACC)
CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼
3. IS THIS REPORT NEW (N) **OR** AMENDED (A) STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer [Electronically Filed] Date / /

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 3 (Revised 05/2016)

Write or Type Committee Name
French Hill for Arkansas

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	156745.89	155211.79
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	156745.89	155211.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	65138.74	349179.61
(b) Total Offsets to Operating Expenditures (from Line 14).....	3962.21	3962.21
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	61176.53	345217.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	951234.37	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

French Hill for Arkansas

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33700.00	28400.00
(ii) Unitemized.....	1545.89	1811.79
(iii) TOTAL of contributions from individuals ▶	35245.89	30211.79
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	121500.00	125000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	156745.89	155211.79
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3962.21	3962.21
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	160708.10	159174.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	65138.74	349179.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	10000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	25000.00	25000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	90138.74	384179.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	880665.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	160708.10
25. SUBTOTAL (add Line 23 and Line 24).....	1041373.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	90138.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	951234.37

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 62	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
ANDERSON, JOHN, , ,

Mailing Address **1133 CONNECTICUT AVENUE, NW
SUITE 620**

City WASHINGTON	State DC	Zip Code 20036-4362
---------------------------	--------------------	-------------------------------

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

Name of Employer RFA	Occupation CONSULTANT
--------------------------------	---------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11A.37540

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOHIGIAN, DAVID, , ,

Mailing Address **2970 CHAIN BRIDGE RD, NW**

City WASHINGTON	State DC	Zip Code 20016-3408
---------------------------	--------------------	-------------------------------

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

Name of Employer PLURIBUS VENTURES	Occupation INVESTMENT
--	---------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2023

Transaction ID : SA11A.37439

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRACHMAN, MARSHALL, , MR.,

Mailing Address **634 A STREET NE**

City WASHINGTON	State DC	Zip Code 20002-6030
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation LOBBYIST
--	-------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2023

Transaction ID : SA11A.37510

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 62	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
BROWN, BENJAMIN, , MR.,

Mailing Address 5110 DALECARLIA DRIVE

City BETHESDA	State MD	Zip Code 20816-1802
------------------	-------------	------------------------

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

Name of Employer BLUE RIDGE LAW & POLICY	Occupation ATTORNEY
---	------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2023

Transaction ID : SA11A.37509

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARAPIET, JOSEPH, J., MR.,

Mailing Address 555 MASSACHUSETTS AVE NW, APT. 512

City WASHINGTON	State DC	Zip Code 20001-4720
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FEC ID number of contributing federal political committee. **C**

Name of Employer BLACKSTONE	Occupation MANAGING DIRECTOR
--------------------------------	---------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 21 / 2023

Transaction ID : SA11A.37413

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GALLAGHER, DANIEL, M., MR.,

Mailing Address 7900 RUXWOOD ROAD

City TOWSON	State MD	Zip Code 21204-3541
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FEC ID number of contributing federal political committee. **C**

Name of Employer ROBINHOOD MARKETS	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2023

Transaction ID : SA11A.37448

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

4500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
GANS, DAN, , MR.,

Mailing Address 22 N PINE CIRCLE

City BELLEAIR	State FL	Zip Code 33756-1640
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FEC ID number of contributing federal political committee. **C**

Name of Employer POLARIS CONSULTING	Occupation PARTNER
--	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11A.37539

Amount of Each Receipt this Period
1250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GAYNOR, WILLIAM, , MR.,

Mailing Address 4980 HILLBROOK LANE NORTHWEST

City WASHINGTON	State DC	Zip Code 20016-3208
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FEC ID number of contributing federal political committee. **C**

Name of Employer ROCK CREEK ADVISORS	Occupation PRESIDENT
---	-------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2023

Transaction ID : SA11A.37488

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HITCHCOCK, KELLY, , MS.,

Mailing Address 2509 LESLIE AVENUE

City ALEXANDRIA	State VA	Zip Code 22301-1114
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FEC ID number of contributing federal political committee. **C**

Name of Employer INVARIANT	Occupation GOVERNMENT RELATIONS
-------------------------------	------------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2023

Transaction ID : SA11A.37508

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

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

2750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
JACHYM, JONATHAN, , ,

Mailing Address 106 QUEEN STREET

City ALEXANDRIA State VA Zip Code 22314-2611

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

Name of Employer PAYWARD INC Occupation POLICY

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2023

Transaction ID : SA11A.37538

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIM, THOMAS, , ,

Mailing Address 7009 ARBOR LANE

City MC LEAN State VA Zip Code 22101-1545

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

Name of Employer THOMAS CAPITOL PARTNERS, INC. Occupation PRESIDENT

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11A.37542

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LILES, WILLIAM, , MR.,

Mailing Address 2013 N. INGLEWOOD STREET

City ARLINGTON State VA Zip Code 22205-3150

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

Name of Employer BLUE RIDGE LAW & POLICY Occupation ATTORNEY

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 12 / 2023

Transaction ID : SA11A.37452

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MCCARTY, PATRICK, , MR.,

Mailing Address 2108 WOODMONT ROAD

City ALEXANDRIA State VA Zip Code 22307-1155

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

Name of Employer MCCARTY FINANCIAL LLC Occupation CONSULTANT

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2023

Transaction ID : SA11A.37440

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MOSKOWITZ, LUCAS, , MR.,

Mailing Address 2733 P ST NW

City WASHINGTON State DC Zip Code 20007-3065

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

Name of Employer ROBINHOOD MARKETS, INC. Occupation ATTORNEY

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2023

Transaction ID : SA11A.37440

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NORMAN, WILLIAM, SCOTT, MR., JR.

Mailing Address 2802 WINDSOR ROAD

City AUSTIN State TX Zip Code 78703-3044

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

Name of Employer FINANCE OF AMERICA Occupation MORTGAGE BANKER

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2023

Transaction ID : SA11A.37373

Amount of Each Receipt this Period
2900.00

Memo Item
CONTRIBUTION

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

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

3900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE 10 OF 62	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
OLSON, LYNDON, L., AMBASSADOR, JR.

Mailing Address 5400 BOSQUE BOULEVARD

City	State	Zip Code
WACO	TX	76710-4482

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

Name of Employer	Occupation
TEXAS RITE HOSPITAL FOR CHILDREN	CHAIRMAN

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		23		2023

Transaction ID : SA11A.37415

Amount of Each Receipt this Period
 _____ 2900.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
QUINTILIAN, JOSEPH, , ,

Mailing Address 801 S OLIVE AVENUE

City	State	Zip Code
WEST PALM BEACH	FL	33401-6120

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

Name of Employer	Occupation
DISTRIBUTED CAPITAL PARTNERS	VENTURE CAPITAL

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		28		2023

Transaction ID : SA11A.37438

Amount of Each Receipt this Period
 _____ 3300.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERTI, CLIFF, , MR.,

Mailing Address 2725 BLAINE DRIVE

City	State	Zip Code
CHEVY CHASE	MD	20815-3043

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

Name of Employer	Occupation
FEDERAL HALL POLICY ADVISORS, LLC	CONSULTANT

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		29		2023

Transaction ID : SA11A.37537

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	_____ 7200.00
TOTAL This Period (last page this line number only).....▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
SACKETT, DEAN, , ,

Mailing Address 8541 RIVERSIDE RD

City ALEXANDRIA State VA Zip Code 22308-2206

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

Name of Employer POLARIS CAPITOL STRATEGIES Occupation ATTORNEY / LOBBYIST

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 04 2023

Transaction ID : SA11A.37442

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SAWYER, JARED, C., MR.,

Mailing Address 6206 VERNON PALMER COURT

City MCLEAN State VA Zip Code 22101-2349

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

Name of Employer RICH FEUER ANDERSON Occupation CONSULTANT

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 31 2023

Transaction ID : SA11A.37541

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCHWARZMAN, STEPHEN, A., MR.,

Mailing Address 345 PARK AVENUE
44TH FLOOR

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer BLACKSTONE Occupation CHAIRMAN, CEO & CO-FOUNDER

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6600.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 16 2023

Transaction ID : SA11A.37397

Amount of Each Receipt this Period
6600.00

Memo Item CONTRIBUTION
SEE REDESIGNATION

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

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

8100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
SCHWARZMAN, STEPHEN, A., MR.,

Mailing Address 345 PARK AVENUE
44TH FLOOR

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer Occupation
BLACKSTONE CHAIRMAN, CEO & CO-FOUNDER

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2023

Transaction ID : SA11A.37410

Amount of Each Receipt this Period
- 3300.00

Memo Item
CONTRIBUTION
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
SCHWARZMAN, STEPHEN, A., MR.,

Mailing Address 345 PARK AVENUE
44TH FLOOR

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer Occupation
BLACKSTONE CHAIRMAN, CEO & CO-FOUNDER

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2023

Transaction ID : SA11A.37411

Amount of Each Receipt this Period
3300.00

Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
SOBBA, ALAN, , ,

Mailing Address 415 HOLLOW DRIVE

City HOUSTON State TX Zip Code 77024-4935

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

Name of Employer Occupation
SOBBA PUBLIC, LLC CONSULTANT

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2023

Transaction ID : SA11A.37450

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

1000.00

33700.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
ALLY FINANCIAL INC. ADVOCACY PAC

Mailing Address **25 MASSACHUSETTS AVE NW**

City **WASHINGTON** State **DC** Zip Code **20001-1430**

FEC ID number of contributing federal political committee. **C C00579540**

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37523

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL

Mailing Address **PALLADIAN 1
220 LEIGH FARM RD**

City **DURHAM** State **NC** Zip Code **27707-8110**

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2023

Transaction ID : SA11C.37443

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOC PHYSICAL THERAPY PAC

Mailing Address **1111 N FAIRFAX ST**

City **ALEXANDRIA** State **VA** Zip Code **22314-1484**

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2023

Transaction ID : SA11C.37505

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **8500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
AMERIPRISE FINANCIAL INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 912 WEST

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00414474

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37768

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AON CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 200 EAST RANDOLPH STREET

City CHICAGO State IL Zip Code 60601-6436

FEC ID number of contributing federal political committee. **C** C00211250

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 10 / 2023

Transaction ID : SA11C.37389

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
APPRAISAL INSTITUTE PAC

Mailing Address 440 1ST STREET NW, SUITE 880

City WASHINGTON State DC Zip Code 20001-3018

FEC ID number of contributing federal political committee. **C** C00144261

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37770

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

6500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
BLACKROCK FUNDS SERVICES GROUP LLC PAC

Mailing Address 40 E 52ND ST

City NEW YORK State NY Zip Code 10022-5911

FEC ID number of contributing federal political committee. **C** C00479246

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37529

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BNY MELLON-FEDERAL PAC

Mailing Address BNY MELLON CENTER
ROOM 3225

City PITTSBURGH State PA Zip Code 15258-0001

FEC ID number of contributing federal political committee. **C** C00494534

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37769

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAPITAL GROUP COMPANIES INC PAC

Mailing Address 333 S HOPE ST

City LOS ANGELES State CA Zip Code 90071-1406

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37545

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 16 OF 62	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
CGCN PAC

Mailing Address 1101 K ST NW

City WASHINGTON	State DC	Zip Code 20005-4210
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00690735

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2023

Transaction ID : SA11C.37426

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 365

City WASHINGTON	State DC	Zip Code 20044-0365
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2023

Transaction ID : SA11C.37447

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELEVANCE HEALTH, INC. POLITICAL ACTION COMMITTEE (ELEVANCE H

Mailing Address 1001 PENNSYLVANIA AVENUE, NW
SUITE 710

City WASHINGTON	State DC	Zip Code 20004-2513
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37771

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 17 OF 62	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
ENTERGY CORPORATION PAC

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK	State AR	Zip Code 72201-3405
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37772

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FARMERS GROUP INC PAC

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL	State CA	Zip Code 94901-5596
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00135681

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 06 / 2023

Transaction ID : SA11C.37350

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FARMERS GROUP INC PAC

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL	State CA	Zip Code 94901-5596
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00135681

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 06 / 2023

Transaction ID : SA11C.37351

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
FUTURES INDUSTRY POLITICAL ACTION COMMITTEE (FIPAC)

Mailing Address 2001 PENNSYLVANIA AVE NW
SUITE 600

City WASHINGTON State DC Zip Code 20006-1823

FEC ID number of contributing federal political committee. **C** C00133389

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2023

Transaction ID : SA11C.37512

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION PAC

Mailing Address 2941 FAIRVIEW PARK DRIVE
#100

City FALLS CHURCH State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37517

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JPAC

Mailing Address P.O. BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2023

Transaction ID : SA11C.37428

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC

Mailing Address 2121 CRYSTAL DR

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2023

Transaction ID : SA11C.37455

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036-2708

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2023

Transaction ID : SA11C.37414

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION
IN KIND- FUNDRAISING CONSULTING

C. Full Name (Last, First, Middle Initial)
MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036-2708

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2023

Transaction ID : SA11C.37507

Amount of Each Receipt this Period
1750.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 20 OF 62	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND

Mailing Address 1095 6TH AVE

City NEW YORK	State NY	Zip Code 10036-6797
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2023

Transaction ID : SA11C.37521

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS PAC

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2023

Transaction ID : SA11C.37485

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION PAC

Mailing Address 4300 WILSON BLVD
SUITE 400

City ARLINGTON	State VA	Zip Code 22203-4167
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2023

Transaction ID : SA11C.37765

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item
CONTRIBUTION

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

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

_____ 5500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES ROAD
P.O. BOX 68700

City INDIANAPOLIS State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37766

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL PAC

Mailing Address 1775 EYE ST. NW
SUITE 1100

City WASHINGTON State DC Zip Code 20006-2424

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37520

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITT

Mailing Address ONE NATIONWIDE PLAZA
1-32-301

City COLUMBUS State OH Zip Code 43215-2226

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2023

Transaction ID : SA11C.37444

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 62	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
PNC PAC - FEDERAL

Mailing Address 249 FIFTH AVE, 21ST FLOOR

City PITTSBURGH	State PA	Zip Code 15222-2707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00186064

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37763

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF OR

Mailing Address 317 MASSACHUSETTS AVE., N.E.
1ST FLOOR

City WASHINGTON	State DC	Zip Code 20002-5769
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37522

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. FEDERAL PAC

Mailing Address 751 BROAD ST

City NEWARK	State NJ	Zip Code 07102-3754
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2023

Transaction ID : SA11C.37490

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION PAC

Mailing Address 1015 15TH STREET, N.W.
SUITE 920

City WASHINGTON State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C** C00432252

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2023

Transaction ID : SA11C.37456

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SMALL BUSINESS INVESTOR ALLIANCE PAC

Mailing Address P.O. BOX 14358

City WASHINGTON State DC Zip Code 20044-4358

FEC ID number of contributing federal political committee. **C** C00109991

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37764

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STRUCTURED FINANCE COALITION PAC

Mailing Address 1775 PENNSYLVANIA AVENUE, NW
SUITE 625

City WASHINGTON State DC Zip Code 20006-4758

FEC ID number of contributing federal political committee. **C** C00633354

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2023

Transaction ID : SA11C.37487

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
THE ACXIOM CORPORATION ASSOCIATES PAC

Mailing Address 601 E 3RD ST

City: LITTLE ROCK State: AR Zip Code: 72201-1709

FEC ID number of contributing federal political committee: **C** C00350835

Name of Employer: Occupation:

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt: 03 / 10 / 2023

Transaction ID : SA11C.37453

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE ACXIOM CORPORATION ASSOCIATES PAC

Mailing Address 601 E 3RD ST

City: LITTLE ROCK State: AR Zip Code: 72201-1709

FEC ID number of contributing federal political committee: **C** C00350835

Name of Employer: Occupation:

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt: 03 / 10 / 2023

Transaction ID : SA11C.37454

Amount of Each Receipt this Period: 1500.00

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 NE ADAMS STREET

City: PEORIA State: IL Zip Code: 61629-0001

FEC ID number of contributing federal political committee: **C** C00148031

Name of Employer: Occupation:

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt: 03 / 31 / 2023

Transaction ID : SA11C.37760

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 11500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 25 OF 62	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37518

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE HARTFORD FINANCIAL SERVICES GROUP, INC. FEDERAL PAC

Mailing Address 1 HARTFORD PLAZA

City HARTFORD	State CT	Zip Code 06155-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00511444

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2023

Transaction ID : SA11C.37544

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE REAL ESTATE ROUNDTABLE PAC

Mailing Address 801 PENNSYLVANIA AVE NW
STE 720

City WASHINGTON	State DC	Zip Code 20004-2686
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 23 / 2023

Transaction ID : SA11C.37416

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 62
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
THE REAL ESTATE ROUNDTABLE PAC

Mailing Address 801 PENNSYLVANIA AVE NW
STE 720

City WASHINGTON State DC Zip Code 20004-2686

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2023

Transaction ID : SA11C.37506

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 950 F STREET NW
SUITE 750

City WASHINGTON State DC Zip Code 20004-1487

FEC ID number of contributing federal political committee. **C** C00488882

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37761

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 950 F STREET NW
SUITE 750

City WASHINGTON State DC Zip Code 20004-1487

FEC ID number of contributing federal political committee. **C** C00488882

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37762

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 12500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Mailing Address 600 WASHINGTON BOULEVARD
C/O PER DYRVIK

City STAMFORD	State CT	Zip Code 06901-3726
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11C.37519

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA E

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer	Occupation
------------------	------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA11C.37767

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	121500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 28 OF 62	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
TCM BANK, N.A.

Mailing Address **3501 EAST FRONTAGE ROAD
STE. 200**

City **TAMPA** State **FL** Zip Code **33607**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3962.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 10 / 2023

Transaction ID : SA14.21068

Amount of Each Receipt this Period
3962.21

Memo Item
OVERPAYMENT REFUND

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3962.21
TOTAL This Period (last page this line number only)..... ▶	3962.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. HILL, JAMES, FRENCH, ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2023	
Mailing Address P.O. BOX 7841			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72217	Amount of Each Disbursement this Period 612.00	
Purpose of Disbursement REIMBURSEMENT- SEE MEMO			Transaction ID : SB17.I21056	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CAVINESS CATTLE & QUAIL			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2023	
Mailing Address 4906 C T ROAD			FEC Identification Number C	
City HAZEN	State AR	Zip Code 72064	Amount of Each Disbursement this Period 270.00	
Purpose of Disbursement EVENT TICKETS			Transaction ID : SB17.I21113	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GREENBERG SMOKED TURKEYS			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2023	
Mailing Address 221 NORTH MCMURREY DRIVE			FEC Identification Number C	
City TYLER	State TX	Zip Code 75702	Amount of Each Disbursement this Period 342.00	
Purpose of Disbursement LEADERSHIP EVENT			Transaction ID : SB17.I21112	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	612.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. HILL, JAMES, FRENCH, ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023	
Mailing Address P.O. BOX 7841			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72217	Amount of Each Disbursement this Period 900.21	
Purpose of Disbursement REIMBURSEMENT- SEE MEMO			Transaction ID : SB17.I21142	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. THE COUNTRY CLUB OF LITTLE ROCK			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023	
Mailing Address 4200 COUNTRY CLUB BOULEVARD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 900.21	
Purpose of Disbursement MEETING EXPENSE			Transaction ID : SB17.I21143	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HILL, MARTHA , , MRS.,			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2023	
Mailing Address 7 CANTRELL ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 276.31	
Purpose of Disbursement REIMBURSEMENT- SEE MEMO			Transaction ID : SB17.I21131	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1176.52
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. MARRIOTT HOTEL

Full Name (Last, First, Middle Initial)
Mailing Address 700 ALICEANNA ST

City BALTIMORE State MD Zip Code 21202

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 03 / 03 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 231.50

Transaction ID : SB17.I21133

Memo Item

B. UBER

Full Name (Last, First, Middle Initial)
Mailing Address 800 MARKET STREET STE 400

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 03 / 03 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 44.81

Transaction ID : SB17.I21134

Memo Item

C. HILL, MARTHA , , MRS.,

Full Name (Last, First, Middle Initial)
Mailing Address 7 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72207

Purpose of Disbursement PARKING REIMBURSEMENT- NO ITEMIZATION NECESSARY

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 34.76

Transaction ID : SB17.I21195

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 34.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RICKELS, DONNA, MISSY, MRS.,			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2023	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 53.90	
Purpose of Disbursement POSTAGE REIMBURSEMENT- NO ITEMIZATION NECESSARY			Transaction ID : SB17.I21130	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ADVANCE PRINT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2023	
Mailing Address 2201 BROOKWOOD DRIVE SUITE 104			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 109.28	
Purpose of Disbursement PRINTING SERVICES			Transaction ID : SB17.I21050	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ADVANCE PRINT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2023	
Mailing Address 2201 BROOKWOOD DRIVE SUITE 104			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 512.71	
Purpose of Disbursement PRINTING SERVICES			Transaction ID : SB17.I21126	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	675.89
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. AMAZON CORPORATE LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2023	
Mailing Address 601 NEW JERSEY AVENUE NORTHWEST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 13000.00	
Purpose of Disbursement EVENT SPACE RENTAL		Category/ Type	Transaction ID : SB17.I21124	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2023	
Mailing Address 208 SOUTH AKARD STREET			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75202	Amount of Each Disbursement this Period 209.76	
Purpose of Disbursement TELEPHONE SERVICES		Category/ Type	Transaction ID : SB17.I21008	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2023	
Mailing Address 208 SOUTH AKARD STREET			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75202	Amount of Each Disbursement this Period 73.83	
Purpose of Disbursement TELEPHONE SERVICES		Category/ Type	Transaction ID : SB17.I21071	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	13283.59
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2023
Mailing Address 208 SOUTH AKARD STREET		FEC Identification Number C
City DALLAS	State TX	Zip Code 75202
Purpose of Disbursement TELEPHONE SERVICES		Amount of Each Disbursement this Period 278.26
Candidate Name		Transaction ID : SB17.I21072
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2023
Mailing Address 208 SOUTH AKARD STREET		FEC Identification Number C
City DALLAS	State TX	Zip Code 75202
Purpose of Disbursement TELEPHONE SERVICES		Amount of Each Disbursement this Period 83.82
Candidate Name		Transaction ID : SB17.I21129
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address 208 SOUTH AKARD STREET		FEC Identification Number C
City DALLAS	State TX	Zip Code 75202
Purpose of Disbursement TELEPHONE SERVICES		Amount of Each Disbursement this Period 172.02
Candidate Name		Transaction ID : SB17.I21145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	534.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2023
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21052
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2023
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21122
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2023
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21193
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 62			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2023		
Mailing Address 300 FIRST ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 100.27		
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21010		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2023		
Mailing Address 300 FIRST ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 604.30		
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21069		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023		
Mailing Address 300 FIRST ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 455.94		
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21085		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1160.51
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2023	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 41.54	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21125	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 270.85	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21186	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. COMCAST			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2023	
Mailing Address 1701 JOHN F KENNEDY BOULEVARD			FEC Identification Number C	
City PHILADELPHIA	State PA	Zip Code 19103	Amount of Each Disbursement this Period 72.65	
Purpose of Disbursement CABLE & INTERNET SERVICES		Category/ Type	Transaction ID : SB17.I21128	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	385.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. DELUXE BUSINESS SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2023
Mailing Address 3680 VICTORIA STREET NORTH		FEC Identification Number C
City SHOREVIEW	State MN	Zip Code 55126-2966
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 204.91
Candidate Name		Transaction ID : SB17.I21055
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. DIRECT MAIL SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2023
Mailing Address 12450 AUTOMOBILE BOULEVARD		FEC Identification Number C
City CLEARWATER	State FL	Zip Code 33762
Purpose of Disbursement DIRECT MAIL SERVICES		Amount of Each Disbursement this Period 1022.35
Candidate Name		Transaction ID : SB17.I21141
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. LITTLE ROCK REGIONAL CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2023
Mailing Address 200 EAST MARKHAM STREET		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement MEMBERSHIP DUES		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : SB17.I21231
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1577.26
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MITCHELL WILLIAMS LAW		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2023
Mailing Address 425 WEST CAPITOL AVENUE		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement LEGAL SERVICES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 200.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21051
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MITCHELL WILLIAMS LAW		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2023
Mailing Address 425 WEST CAPITOL AVENUE		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement LEGAL SERVICES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 440.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21152
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAYCHEX INVESTMENT PARTNERSHIP, LP		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2023
Mailing Address 911 PANORAMA TRAIL SOUTH		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14625
Purpose of Disbursement PAYROLL WAGES- SEE MEMO	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1424.72	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21053
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2064.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RICKELS, DONNA, MISSY, MRS.,			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2023	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 1424.72	
Purpose of Disbursement PAYROLL WAGES		Category/Type	Transaction ID : SB17.I21054	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2023	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 515.62	
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : SB17.I21061	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYCHEX INVESTMENT PARTNERSHIP, LP			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2023	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 274.25	
Purpose of Disbursement PAYROLL FEES		Category/Type	Transaction ID : SB17.I21062	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	789.87
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PAYCHEX INVESTMENT PARTNERSHIP, LP			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2023	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 595.70	
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : SB17.I21114	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2023	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 1619.80	
Purpose of Disbursement PAYROLL WAGES- SEE MEMO		Category/Type	Transaction ID : SB17.I21115	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. RICKELS, DONNA, MISSY, MRS.,			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2023	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 1619.80	
Purpose of Disbursement PAYROLL WAGES		Category/Type	Transaction ID : SB17.I21116	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2215.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PAYCHEX INVESTMENT PARTNERSHIP, LP		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2023
Mailing Address 911 PANORAMA TRAIL SOUTH		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14625
Purpose of Disbursement PAYROLL FEES		Amount of Each Disbursement this Period 136.75
Candidate Name		Transaction ID : SB17.I21123
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023
Mailing Address 911 PANORAMA TRAIL SOUTH		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14625
Purpose of Disbursement PAYROLL WAGES- SEE MEMO		Amount of Each Disbursement this Period 1269.67
Candidate Name		Transaction ID : SB17.I21166
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. RICKELS, DONNA, MISSY, MRS.,		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023
Mailing Address 311 MCMILLEN TRAIL		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement PAYROLL WAGES		Amount of Each Disbursement this Period 1269.67
Candidate Name		Transaction ID : SB17.I21167
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1406.42
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PAYCHEX INVESTMENT PARTNERSHIP, LP		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2023
Mailing Address 911 PANORAMA TRAIL SOUTH		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14625
Purpose of Disbursement PAYROLL FEES		Amount of Each Disbursement this Period 136.75
Candidate Name		Transaction ID : SB17.I21191
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2023
Mailing Address 911 PANORAMA TRAIL SOUTH		FEC Identification Number C
City ROCHESTER	State NY	Zip Code 14625
Purpose of Disbursement PAYROLL TAXES		Amount of Each Disbursement this Period 451.94
Candidate Name		Transaction ID : SB17.I21192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. PEARTREE, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2023
Mailing Address 200 RIVER MARKET AVE. #501		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement RENT		Amount of Each Disbursement this Period 1170.00
Candidate Name		Transaction ID : SB17.I21065
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1758.69
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PEARTREE, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2023
Mailing Address 200 RIVER MARKET AVE. #501		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement RENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1170.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21137
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES, INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2023
Mailing Address 824 SOUTH MILLEDGE AVENUE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2021.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21047
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES, INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2023
Mailing Address 824 SOUTH MILLEDGE AVENUE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2373.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21118
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5564.80
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2023
Mailing Address 1501 N. UNIVERSITY AVENUE		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement RENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 736.12	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21066
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2023
Mailing Address 1501 N. UNIVERSITY AVENUE		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement RENT	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 735.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21138
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 0.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I20999
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1472.11
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2023	
Mailing Address P.O. BOX 26466			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 142.35	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I21045	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2023	
Mailing Address P.O. BOX 26466			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 0.99	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I21063	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address P.O. BOX 26466			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 323.65	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I21078	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	466.99
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 235.95
Candidate Name		Transaction ID : SB17.I21135
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 25.74
Candidate Name		Transaction ID : SB17.I21136
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 196.75
Candidate Name		Transaction ID : SB17.I21147
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	458.44
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 62			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2023		
Mailing Address P.O. BOX 26466			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 125.45		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : SB17.I21148		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2023		
Mailing Address P.O. BOX 26466			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 49.25		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : SB17.I21155		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2023		
Mailing Address P.O. BOX 26466			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Disbursement this Period 98.75		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : SB17.I21165		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	273.45
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 98.50
Candidate Name		Transaction ID : SB17.I21188
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2023
Mailing Address P.O. BOX 26466		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72221
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 172.50
Candidate Name		Transaction ID : SB17.I21189
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. SIMMONS BANK		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023
Mailing Address 501 MAIN STREET		FEC Identification Number C
City PINE BLUFF	State AR	Zip Code 71601
Purpose of Disbursement SEE MEMO ITEMS		Amount of Each Disbursement this Period 2911.29
Candidate Name		Transaction ID : SB17.I21011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3182.29
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAPITOL HILL WINE & SPIRITS			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023	
Mailing Address 323 PENNSYLVANIA AVENUE SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 308.98	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21026	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023	
Mailing Address 3675 PRECISION DRIVE			FEC Identification Number C	
City LOVELAND	State CO	Zip Code 80538	Amount of Each Disbursement this Period 369.00	
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : SB17.I21013	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. SIMMONS BANK			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023	
Mailing Address 501 MAIN STREET			FEC Identification Number C	
City PINE BLUFF	State AR	Zip Code 71601	Amount of Each Disbursement this Period 35.00	
Purpose of Disbursement SERVICE CHARGE		Category/ Type	Transaction ID : SB17.I21014	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 62			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. U.S. HOUSE OF REPRESENTATIVES GIFT SHOP

Full Name (Last, First, Middle Initial)
Mailing Address 9 INDEPENDENCE AVE SE

City WASHINGTON State DC Zip Code 20515

Purpose of Disbursement DONOR GIFTS- CHRISTMAS ORNAMENTS

Candidate Name

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

State: District:

Date of Disbursement: 01 / 13 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 133.25

Transaction ID : SB17.I21048

Memo Item

B. UBER

Full Name (Last, First, Middle Initial)
Mailing Address 800 MARKET STREET STE 400

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement TRAVEL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement: 01 / 13 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 103.56

Transaction ID : SB17.I21018

Memo Item

C. US POSTAL SERVICE

Full Name (Last, First, Middle Initial)
Mailing Address 5420 KAVANAUGH BOULEVARD

City LITTLE ROCK State AR Zip Code 72207

Purpose of Disbursement POSTAGE

Candidate Name

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

State: District:

Date of Disbursement: 01 / 13 / 2023

FEC Identification Number: C

Amount of Each Disbursement this Period: 1301.65

Transaction ID : SB17.I21015

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. US SENATE GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023	
Mailing Address C STREET NORTHWEST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20510	Amount of Each Disbursement this Period 236.00	
Purpose of Disbursement DONOR GIFTS- PAPER WEIGHTS			Transaction ID : SB17.I21017	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SIMMONS BANK			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 501 MAIN STREET			FEC Identification Number C	
City PINE BLUFF	State AR	Zip Code 71601	Amount of Each Disbursement this Period 9229.79	
Purpose of Disbursement SEE MEMO ITEMS			Transaction ID : SB17.I21084	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address P.O. BOX 619616 MD 5675			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75261	Amount of Each Disbursement this Period 1311.01	
Purpose of Disbursement TRAVEL EXPENSE			Transaction ID : SB17.I21086	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9229.79
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CHEERS IN THE HEIGHTS			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 2010 NORTH VAN BUREN STREET			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 601.62	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I21105	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 3675 PRECISION DRIVE			FEC Identification Number C	
City LOVELAND	State CO	Zip Code 80538	Amount of Each Disbursement this Period 315.00	
Purpose of Disbursement EMAIL SERVICES		Category/ Type	Transaction ID : SB17.I21091	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address PO BOX 20706			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30320	Amount of Each Disbursement this Period 2740.60	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21090	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MOUNT VERNON SHOP			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 3200 MOUNT VERNON MEMORIAL HIGHWAY			FEC Identification Number C	
City MOUNT VERNON	State VA	Zip Code 22121	Amount of Each Disbursement this Period 209.00	
Purpose of Disbursement DONOR GIFT- BOOK		Category/Type	Transaction ID : SB17.I21110	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 2600 CANTRELL ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 91.23	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.I21103	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. RED APPLE INN			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023	
Mailing Address 305 CLUB DR.			FEC Identification Number C	
City HEBER SPRINGS	State AR	Zip Code 72543	Amount of Each Disbursement this Period 264.06	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I21102	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. UBER			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023		
Mailing Address 800 MARKET STREET STE 400			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 189.46		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21094		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023		
Mailing Address 233 SOUTH WACKER DRIVE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 607.10		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21095		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. USHR			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2023		
Mailing Address 2039 RAYBURN HOUSE OFFICE BUILDING			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20515	Amount of Each Disbursement this Period 2274.21		
Purpose of Disbursement EVENT CATERING		Category/ Type	Transaction ID : SB17.I21108		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. SIMMONS BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address 501 MAIN STREET		FEC Identification Number C
City PINE BLUFF	State AR	Zip Code 71601
Purpose of Disbursement SEE MEMO ITEMS		Amount of Each Disbursement this Period 1396.01
Candidate Name		Transaction ID : SB17.I21144
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address P.O. BOX 619616 MD 5675		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 609.50
Candidate Name		Transaction ID : SB17.I21218
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CONSTANT CONTACT		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address 3675 PRECISION DRIVE		FEC Identification Number C
City LOVELAND	State CO	Zip Code 80538
Purpose of Disbursement EMAIL SERVICES		Amount of Each Disbursement this Period 315.00
Candidate Name		Transaction ID : SB17.I21220
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1396.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address PO BOX 20706		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period - 286.19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21214 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address 2600 CANTRELL ROAD		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72202
Purpose of Disbursement EVENT SUPPLIES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 345.94	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21221 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. SIMMONS BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023
Mailing Address 501 MAIN STREET		FEC Identification Number C
City PINE BLUFF	State AR	Zip Code 71601
Purpose of Disbursement CREDIT CARD FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 35.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21230 <input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE RITZ-CARLTON KEY BISCAYNE			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023	
Mailing Address 455 GRAND BAY DR.			FEC Identification Number C	
City MIAMI	State FL	Zip Code 33149	Amount of Each Disbursement this Period 237.08	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21224	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. UBER			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023	
Mailing Address 800 MARKET STREET STE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 237.92	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21222	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2023	
Mailing Address 233 SOUTH WACKER DRIVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period - 607.10	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : SB17.I21223	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 62			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE METROPOLITAN CLUB		Date of Disbursement
Mailing Address 1700 H ST. NW		M M / D D / Y Y Y Y 01 / 06 / 2023
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement MEETING EXPENSE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 485.65
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21012
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. THE METROPOLITAN CLUB		Date of Disbursement
Mailing Address 1700 H ST. NW		M M / D D / Y Y Y Y 02 / 16 / 2023
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement MEETING EXPENSE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 498.65
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21082
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. THE OORBEEK MEMMOTT GROUP		Date of Disbursement
Mailing Address 611 PENNSYLVANIA AVE, SE #424		M M / D D / Y Y Y Y 03 / 16 / 2023
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I21127
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3484.30
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE OORBEEK MEMMOTT GROUP			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2023	
Mailing Address 611 PENNSYLVANIA AVE, SE #424			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.I21163	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. THE OORBEEK MEMMOTT GROUP			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023	
Mailing Address 611 PENNSYLVANIA AVE, SE #424			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2336.74	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.I21196	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. THE OORBEEK MEMMOTT GROUP			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023	
Mailing Address 611 PENNSYLVANIA AVE, SE #424			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.I21197	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	7336.74
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 62	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2023
Mailing Address 5420 KAVANAUGH BOULEVARD		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement RENTAL DUES		Amount of Each Disbursement this Period 176.00
Candidate Name		Transaction ID : SB17.I21070
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2023
Mailing Address 1166 AVENUE OF THE AMERICAS		FEC Identification Number C C00457234
City NEW YORK	State NY	Zip Code 10036-2708
Purpose of Disbursement IN-KIND CONTRIBUTION		Amount of Each Disbursement this Period 750.00
Candidate Name		Transaction ID : SB17.37414
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item IN KIND- FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) C. REPUBLICAN PARTY OF ARKANSAS		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2023
Mailing Address 1201 W 6TH ST		FEC Identification Number C C00084954
City LITTLE ROCK	State AR	Zip Code 72201-3019
Purpose of Disbursement EVENT TICKETS		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.I21006
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1426.00
TOTAL This Period (last page this line number only).....▶	64665.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 62			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. NRCC			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2023		
Mailing Address 320 FIRST STREET SE			FEC Identification Number C C00075820		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 25000.00		
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.I21057		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	25000.00