



Pryor



- SECRETARY OF THE SENATE
09 FEB -3 AM 11: 11

January 27, 2009

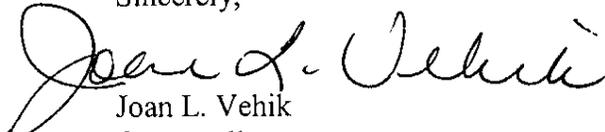
Nancy Erickson
Secretary of the Senate
Office of Public Records
Room 232
Hart Senate Office Building
Washington, DC 20510-7116

Dear Madam Secretary:

Enclosed please find a Statement of Candidacy for Senator Mark Pryor and an amended Statement of Organization for the Mark Pryor for US Senate Campaign.

If you have any questions or need any additional information, please feel free to contact me at 501-590-0804.

Sincerely,



Joan L. Vehik
Comptroller

Mark Pryor for U.S. Senate

Post Office Box 2720 • Little Rock, Arkansas 72203 • Phone 501-590-0804 • Website: www.pryor2008.com

PAID FOR BY THE MARK PRYOR FOR U.S. SENATE COMMITTEE, PHIL HERRINGTON, TREASURER

29020081058

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

09 FEB -3 AM 11:11

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Mark Pryor for US Senate

ADDRESS (number and street)

Post Office Box 2720

(Check if address is changed)

Little Rock

AR

72203

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

pryorforsenate@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.pryor2008.com

COMMITTEE'S FAX NUMBER

2. DATE

MM / DD / YYYY
01 / 21 / 2009

3. FEC IDENTIFICATION NUMBER

C C00366401

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Randy Massanelli

Signature of Treasurer

Randy Massanelli

Date

MM / DD / YYYY
01 / 20 / 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

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5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Mark L Pryor

Candidate Party Affiliation DEM Office Sought: House Senate President State AR District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<u>C</u>
2.	_____	FEC ID number	<u>C</u>
3.	_____	FEC ID number	<u>C</u>
4.	_____	FEC ID number	<u>C</u>
5.	_____	FEC ID number	<u>C</u>

29020081060

Write or Type Committee Name

Mark Pryor for US Senate

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name Randy Massanelli

Mailing Address Post Office Box 2720

Little Rock AR 72203

Title or Position ▼ Campaign Manager Telephone number 501 - 590 - 0804

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Phil Herrington

Mailing Address Post Office Box 2720

Little Rock AR 72203

Title or Position ▼ Treasurer Telephone number 501 - 590 - 0804

29020081061

Full Name of Designated Agent

Randy Massanelli

Mailing Address

Post Office Box 2720

Little Rock

AR

72203

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

501

590

0804

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

One Banc

Mailing Address

Post Office Box 34113

Little Rock

AR

72203

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

First National Bank of Crossett

Mailing Address

218 Main Street

Crossett

AR

71635

CITY

STATE

ZIP CODE

29020081062

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

[ADDITIONAL]

Name of Bank, Depository, etc.

Liberty Bank of Arkansas

Mailing Address

PO Box 400

Siloam Springs

AR

72761

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

29020081063

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

[ADDITIONAL]

Name of Bank, Depository, etc.

First Security Bank

Mailing Address

PO Box 17770

Little Rock

AR

72222

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL

0001 AR 72203



7002 0510 0001 0502 3200

OFFICE OF PUBLIC RECORDS
P.O. BOX 5109
ALEXANDRIA, VA 22301-0109

**X-RAYED
IN THE SENATE
POST OFFICE**



0000



2230:

U.S. POSTAGE
PAID
LITTLE ROCK, AR
JAN 28, 2002
RMDUNT
\$4.38
00089136-15

904 0871062

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
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USPS REGISTERED/CERTIFIED 01-28-09
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USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

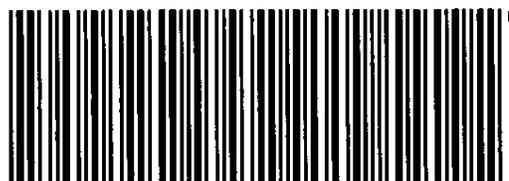
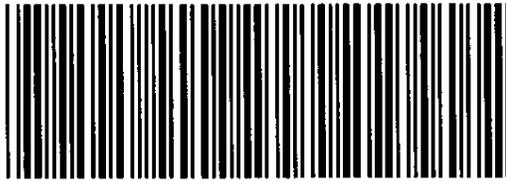
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 02-03-09

29020081066



29020081067