

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL CENTER
2008 APR -8 AM 9:37

Office use only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines

12FE4M5

Huck PAC

ADDRESS (number and street) PO Box 2008

(Check if address is changed) Little Rock AR 72203 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS cturmer@jpmco.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 03 / 28 / 2008

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] 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 Bryan Jeffrey

Signature of Treasurer Electronically Filed by Bryan Jeffrey Date 04 / 07 / 2008

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

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5. TYPE OF COMMITTEE (Check One)

- (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 \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

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

Name of Candidate \_\_\_\_\_

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

- (e)  This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None \_\_\_\_\_

Mailing Address \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

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Write or Type Committee Name

Huck PAC

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 Cale Turner

Mailing Address 11300 Cantrell Road  
Suite 301  
Little Rock AR 72212 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 501 - 227 - 5800

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 Bryan Jeffrey

Mailing Address 11300 Cantrell Road  
Suite 301  
Little Rock AR 72212 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 501 - 227 - 5800

Full Name of Designated Agent Cale Turner

Mailing Address 11300 Cantrell Road  
Suite 301  
Little Rock AR 72212 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 501 - 227 - 5800

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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.

**Delta Trust & Bank**

Mailing Address

**11700 Cantrell Road**

**Little Rock**

**AR**

**72222**

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed. Exp</i>	Shipping Date <i>4/7/08</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jms</i> PREPARER	<i>4/9/08</i> DATE PREPARED