



**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))....	219727.00	830143.96
(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)).....	219727.00	830143.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	68659.11	321758.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	37405.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	68659.11	284353.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	823956.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	63200.00	333750.00
(ii) Unitemized.....	4527.00	13247.00
(iii) TOTAL of contributions from individuals ▶	67727.00	346997.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	152000.00	483146.96
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	219727.00	830143.96
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	16963.67	133109.04
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.) .....	0.00	37405.60
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)..... ▶	236690.67	1000658.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	68659.11	321758.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
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 .....	0.00	1500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	68659.11	323258.94

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	655924.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	236690.67
25. SUBTOTAL (add Line 23 and Line 24).....	892615.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68659.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	823956.32

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

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

FOR LINE NUMBER: PAGE 5 OF 101  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 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, A., MR.,**  
Mailing Address 24 E. MASONIC VIEW AVE

City ALEXANDRIA State VA Zip Code 22301-2204

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

Name of Employer RICH FEUER ANDERSON Occupation CONSULTANT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11A.13713

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANDREWS, COLLINS, , MR.,**  
Mailing Address 73 EL DORADO DRIVE

City LITTLE ROCK State AR Zip Code 72212-2822

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 30 2019

Transaction ID : SA11A.13716

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BANKS, CHARLES, A., MR.,**  
Mailing Address PO BOX 251310

City LITTLE ROCK State AR Zip Code 72225-1310

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

Name of Employer BANKS LAW FIRM PLLC Occupation ATTORNEY

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 27 2019

Transaction ID : SA11A.13745

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1000.00

**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 6 OF 101	
<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)  
**BICKINGS, DUANE, , MR.,**

Mailing Address **54 MARCELLA DRIVE**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72223-9172</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>BANK OZK</b>	Occupation <b>BANKER</b>
-------------------------------------	-----------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 20 / 2019

**Transaction ID : SA11A.13639**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**BICKINGS, DUANE, , MR.,**

Mailing Address **54 MARCELLA DRIVE**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72223-9172</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>BANK OZK</b>	Occupation <b>BANKER</b>
-------------------------------------	-----------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 30 / 2019

**Transaction ID : SA11A.13710**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**BICKINGS, DUANE, , MR.,**

Mailing Address **54 MARCELLA DRIVE**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72223-9172</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>BANK OZK</b>	Occupation <b>BANKER</b>
-------------------------------------	-----------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA11A.13715**

Amount of Each Receipt this Period  

50.00
-------

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<b>150.00</b>
<b>TOTAL</b> 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 7 OF 101  
(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)  
**BRAUNFISCH, ALBERT, , MR.,**

Mailing Address 1 EDGEHILL ROAD

City: LITTLE ROCK State: AR Zip Code: 72207-5443

FEC ID number of contributing federal political committee: C

Name of Employer: MAJORITY STRATEGIES Occupation: MANAGEMENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

Transaction ID : SA11A.13689

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRAUNFISCH, ALBERT, , MR.,**

Mailing Address 1 EDGEHILL ROAD

City: LITTLE ROCK State: AR Zip Code: 72207-5443

FEC ID number of contributing federal political committee: C

Name of Employer: MAJORITY STRATEGIES Occupation: MANAGEMENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

Transaction ID : SA11A.13690

Amount of Each Receipt this Period  
2800.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRINER, FRED, E., MR.,**

Mailing Address 422 N MAIN ST

City: BENTON State: AR Zip Code: 72015-3714

FEC ID number of contributing federal political committee: C

Name of Employer: BRINER LAW FIRM Occupation: ATTORNEY

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : SA11A.13785

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6100.00

**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 8 OF 101		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
**BRONNI, NICHOLAS, , MR.,**

Mailing Address 23 LATOUR LN

City LITTLE ROCK	State AR	Zip Code 72223-8905
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARKANSAS ATTORNEY GENERAL'S OFFICE	Occupation ATTORNEY
--	------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 27 / 2019

**Transaction ID : SA11A.13641**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CARLTON, PAT, , MRS.,**

Mailing Address 7 SUNSET CIRCLE

City LITTLE ROCK	State AR	Zip Code 72207-1717
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 20 / 2019

**Transaction ID : SA11A.13705**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CROCKETT, SCOTT, , MR.,**

Mailing Address PO BOX 025250

City MIAMI	State FL	Zip Code 33102-5250
---------------	-------------	------------------------

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

Name of Employer WHETSTONE HOLDINGS	Occupation CEO
--	-------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA11A.13719**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="2250.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="2250.00"/>



**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 101  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**DALY, JUSTIN, , MR.,**

Mailing Address 24 EAST MASONIC VIEW AVENUE

City ALEXANDRIA	State VA	Zip Code 22301-2204
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FEC ID number of contributing federal political committee. **C**

Name of Employer DALY CONSULTING GROUP	Occupation OWNER
---	---------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

**Transaction ID : SA11A.13711**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DALY, JUSTIN, , MR.,**

Mailing Address 24 EAST MASONIC VIEW AVENUE

City ALEXANDRIA	State VA	Zip Code 22301-2204
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FEC ID number of contributing federal political committee. **C**

Name of Employer DALY CONSULTING GROUP	Occupation OWNER
---	---------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

**Transaction ID : SA11A.13712**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DEPOY, MARTIN, , MR.,**

Mailing Address 3396 STUYVESANT PLACE NORTHWEST

City WASHINGTON	State DC	Zip Code 20015-2454
--------------------	-------------	------------------------

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

Name of Employer BOCKORNY GROUP	Occupation EXECUTIVE VICE PRESIDENT
------------------------------------	--

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11A.13873**

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)..... ▶

6100.00

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

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

FOR LINE NUMBER: PAGE 10 OF 101  
(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)  
**DICKEY, BETTY, C., THE HONORA,**  
Mailing Address 132 FALATA CIRCLE

City: LITTLE ROCK State: AR Zip Code: 72223-5089

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt: 09 / 29 / 2019  
Transaction ID : SA11A.13830

Amount of Each Receipt this Period: 250.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DICKIE, CHRISTOPHER, S., MR.,**  
Mailing Address 3600 CANTRELL RD

City: LITTLE ROCK State: AR Zip Code: 72202-1893

FEC ID number of contributing federal political committee: C

Name of Employer: NATURAL STATE RECOVERY CENTER Occupation: CEO/EXECUTIVE DIRECTOR

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 09 / 30 / 2019  
Transaction ID : SA11A.13720

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DILLINGHAM, JOYCE, , MS.,**  
Mailing Address 4916 EAST CRESTWOOD

City: LITTLE ROCK State: AR Zip Code: 72207-5408

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt: 09 / 29 / 2019  
Transaction ID : SA11A.13771

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1250.00

**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 101  
(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)  
**DUKE, STEPHANIE , , MRS.,**

Mailing Address 603 N MARKET ST

City BENTON State AR Zip Code 72015-3739

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.13718

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELLIBEE, MARGARET, , DR.,**

Mailing Address 1224 N POLK ST

City LITTLE ROCK State AR Zip Code 72205-1737

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

Name of Employer PULASKI TECH Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : SA11A.13825

Amount of Each Receipt this Period  
400.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FERSTL, JAMES, T., MR.,**

Mailing Address 5820 SCENIC DRIVE

City LITTLE ROCK State AR Zip Code 72207-2831

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

Name of Employer FERSTL VALUATION SERVICES Occupation REAL ESTATE CONSULTING

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.13714

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**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 12 OF 101  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**French Hill for Arkansas**

**A.** Full Name (Last, First, Middle Initial)  
**FINK, JANE, , MS.,**

Mailing Address 23 RIVER RIDGE RD

City LITTLE ROCK State AR Zip Code 72227-1517

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : **SA11A.13774**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FINLEY, JOE, L., MR.,**

Mailing Address 10770 SAMPLE RD

City ALEXANDER State AR Zip Code 72002-8648

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

Name of Employer **FINLEY & COMPANY, INC** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : **SA11A.13827**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FLAKE, JOHN, J., MR.,**

Mailing Address 425 CAPITOL AVENUE  
SUITE 300

City LITTLE ROCK State AR Zip Code 72201-3440

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

Name of Employer **FLAKE & KELLEY COMM. REAL ESTATE** Occupation **OWNER**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

Transaction ID : **SA11A.13687**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

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

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

4050.00

**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 101  
(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)  
**FLAKE, JOHN, J., MR.,**  
 Mailing Address 425 CAPITOL AVENUE  
 SUITE 300  
 City LITTLE ROCK State AR Zip Code 72201-3440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLAKE & KELLEY COMM. REAL ESTATE Occupation OWNER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019  
**Transaction ID : SA11A.13688**  
 Amount of Each Receipt this Period  
 2200.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FLAKE, L., DICKSON, MR.,**  
 Mailing Address 17 ST. JOHN'S PLACE  
 City LITTLE ROCK State AR Zip Code 72207-3700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLLIERS INTERNATIONAL AR Occupation REAL ESTATE BROKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2019  
**Transaction ID : SA11A.13775**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**FLUCHT, MOZELLA, DEES, MRS.,**  
 Mailing Address 136 CHEROKEE DRIVE  
 City MAUMELLE State AR Zip Code 72113-7402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019  
**Transaction ID : SA11A.13746**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4200.00  
**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 101  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 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)  
**FOGG, JOSEPH, G., MR., III**

Mailing Address P.O. BOX 1097

City: HOLLAND State: OH Zip Code: 43528-1097

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 16 / 2019

Transaction ID : SA11A.13679

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FORD, JOE, T., MR.,**

Mailing Address 100 RIVER BLUFF DR., SUITE 210

City: LITTLE ROCK State: AR Zip Code: 72202-2215

FEC ID number of contributing federal political committee: C

Name of Employer: WESTROCK GROUP, LLC Occupation: CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 09 / 27 / 2019

Transaction ID : SA11A.13728

Amount of Each Receipt this Period: 2800.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FORD, JOE, T., MR.,**

Mailing Address 100 RIVER BLUFF DR., SUITE 210

City: LITTLE ROCK State: AR Zip Code: 72202-2215

FEC ID number of contributing federal political committee: C

Name of Employer: WESTROCK GROUP, LLC Occupation: CHAIRMAN

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 09 / 27 / 2019

Transaction ID : SA11A.13729

Amount of Each Receipt this Period: 2300.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6100.00

**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 15 OF 101  
(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 P.O. BOX 1304

City: ALEXANDRIA State: VA Zip Code: 22313-1304

FEC ID number of contributing federal political committee: C

Name of Employer: POLARIS CONSULTING Occupation: FOUNDER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt: 09 / 30 / 2019

Transaction ID : SA11A.13722

Amount of Each Receipt this Period: 2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GARDNER, LEWIS, R., MR.,**

Mailing Address 299 COUGAR TERRACE

City: HOT SPRINGS State: AR Zip Code: 71913-8158

FEC ID number of contributing federal political committee: C

Name of Employer: GATEWAY BANK Occupation: EXECUTIVE

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 09 / 29 / 2019

Transaction ID : SA11A.13768

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GRAVES, JAMES, E., MR.,**

Mailing Address 8 BANDA PL

City: HOT SPRINGS VILLAG State: AR Zip Code: 71909-5101

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED PER BEST EFF Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt: 09 / 29 / 2019

Transaction ID : SA11A.13820

Amount of Each Receipt this Period: 200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3700.00

**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 16 OF 101  
(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)  
**GUNDERMAN, KENNETH, ALLEN, MR.,**

Mailing Address 2000 COUNTRY CLUB LANE

City: LITTLE ROCK State: AR Zip Code: 72207-2038

FEC ID number of contributing federal political committee: C

Name of Employer: UNITI Occupation: CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5600.00

Date of Receipt: 09 / 24 / 2019

Transaction ID : SA11A.13730

Amount of Each Receipt this Period: 2800.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HOPE, ALAN, , MR.,**

Mailing Address 221 SOUTH RIDGE ROAD

City: LITTLE ROCK State: AR Zip Code: 72207-2523

FEC ID number of contributing federal political committee: C

Name of Employer: POWERS OF ARKANSAS Occupation: CEO

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 29 / 2019

Transaction ID : SA11A.13769

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**IRBY, STUART, , MR.,**

Mailing Address 3917 VALLEY VIEW DR

City: LITTLE ROCK State: AR Zip Code: 72212-2041

FEC ID number of contributing federal political committee: C

Name of Employer: STEPHENS INC Occupation: INVESTMENT BANKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 750.00

Date of Receipt: 09 / 27 / 2019

Transaction ID : SA11A.13744

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4300.00

**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 17 OF 101	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**JARKOWSKI, HOPE, , MS.,**

Mailing Address **243 NORTH HIGHLAND STREET**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201-1250</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>DELTA STRATEGY GROUP</b>	Occupation <b>PARTNER - GOVERNMENT AFFAIRS</b>
---	---

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

**Transaction ID : SA11A.13717**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFRIES, CURTIS, , MR.,**

Mailing Address **27 EAST PALISADES**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72207-1903</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>STEPHENS, INC.</b>	Occupation <b>SENIOR VICE PRESIDENT</b>
---	--

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**350.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 29 / 2019

**Transaction ID : SA11A.13770**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**LIEM, PHAM, H., DR.,**

Mailing Address **343 VALLEY CLUB CIRCLE**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72212-2900</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 29 / 2019

**Transaction ID : SA11A.13778**

Amount of Each Receipt this Period  

500.00
--------

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<b>1600.00</b>
<b>TOTAL</b> 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 101  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**LINDSEY, CARL, E., MR., JR.**

Mailing Address **64 COUNTRY CLUB CIRCLE**

City <b>SEARCY</b>	State <b>AR</b>	Zip Code <b>72143-8904</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 29 / 2019

**Transaction ID : SA11A.13772**

Amount of Each Receipt this Period  

250.00
--------

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MCKUIN, BARRY, , MR.,**

Mailing Address **822 EAST BURROW**

City <b>MORRILTON</b>	State <b>AR</b>	Zip Code <b>72110-4409</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 22 / 2019

**Transaction ID : SA11A.13645**

Amount of Each Receipt this Period  

250.00
--------

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MEEKS, W RUSSELL, , MR., III**

Mailing Address **9 MASTERS CIRCLE**

City <b>LITTLE ROCK</b>	State <b>AR</b>	Zip Code <b>72212-3310</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>MEEKS AND JERNIGAN, P.A.</b>	Occupation <b>ATTORNEY</b>
---	-------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 20 / 2019

**Transaction ID : SA11A.13704**

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)..... ▶

1500.00
---------

**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 19 OF 101	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**NGUYEN, ANGELA, , DR.,**

Mailing Address 20 LIVEREE LN

City LITTLE ROCK	State AR	Zip Code 72223-5986
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FEC ID number of contributing federal political committee. **C**

Name of Employer GASTROARKANSAS	Occupation PHYSICIAN
------------------------------------	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2019

**Transaction ID : SA11A.13779**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NOLAN, JEFFERY, W., MR.,**

Mailing Address 202 W 19TH ST

City EL DORADO	State AR	Zip Code 71730-3115
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2019

**Transaction ID : SA11A.13723**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2800.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NOLAN, JEFFERY, W., MR.,**

Mailing Address 202 W 19TH ST

City EL DORADO	State AR	Zip Code 71730-3115
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2019

**Transaction ID : SA11A.13724**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2800.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 5650.00
<b>TOTAL</b> 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 20 OF 101  
(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)  
**O'CONNOR, LYNN, , MRS.,**  
 Mailing Address 10 WEST PALISADES DRIVE  
 City LITTLE ROCK State AR Zip Code 72207-1854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2019  
**Transaction ID : SA11A.13708**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**PANEYKO, STEPHEN, H., MR.,**  
 Mailing Address 30 DUNCAN LANE  
 City SKILLMAN State NJ Zip Code 08558-2313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation BANKER  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2019  
**Transaction ID : SA11A.13678**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**PHILIPS, WILLIAM, INGRAM, COLONEL, III**  
 Mailing Address 103 TANGLEWOOD CIRCLE  
 City FAIRFIELD BAY State AR Zip Code 72088-4501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2019  
**Transaction ID : SA11A.13828**  
 Amount of Each Receipt this Period  
 800.00  
 Memo Item  
**CONTRIBUTION**

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

3600.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 101  
(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)  
**ROBERTI, CLIFFORD, , MR.,**

Mailing Address 2725 BLAINE DR

City CHEVY CHASE State MD Zip Code 20815-3043

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

Name of Employer FEDERAL HALL POLICY ADVISORS, LLC Occupation CONSULTANT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.13721

Amount of Each Receipt this Period  
1300.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SIMON, PATRICIA, KING, MRS.,**

Mailing Address 11823 FAIRWAY DRIVE

City LITTLE ROCK State AR Zip Code 72212-3422

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

Transaction ID : SA11A.13826

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SNIDER, TED, , MR., JR.**

Mailing Address PO BOX 3295

City LITTLE ROCK State AR Zip Code 72203-3295

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2019

Transaction ID : SA11A.12628

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4350.00

**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 22 OF 101  
(check only one)

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

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)  
**SNIDER, TED, , MR., JR.**

Mailing Address PO BOX 3295

City LITTLE ROCK	State AR	Zip Code 72203-3295
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2019

**Transaction ID : SA11A.13605**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS, AUDRA, R., MRS.,**

Mailing Address 48 SOLOGNE CIR

City LITTLE ROCK	State AR	Zip Code 72223-8914
---------------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11A.13743**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WHIPPLE, ROSS, , MR.,**

Mailing Address P.O. BOX 515

City ARKADELPHIA	State AR	Zip Code 71923-0515
---------------------	-------------	------------------------

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

Name of Employer HORIZON TIMBER SERVICES	Occupation PRESIDENT
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11A.13756**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4800.00
<b>TOTAL</b> 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 23 OF 101	
<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)  
**WILSON, LARRY, T., MR.,**

Mailing Address 3 NIXON DRIVE

City JACKSONVILLE	State AR	Zip Code 72076-5516
----------------------	-------------	------------------------

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

Name of Employer FIRST ARKANSAS BANK & TRUST	Occupation BANKER
---	----------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11A.13777**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	63200.00

**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 24 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**ABBVIE POLITICAL ACTION COMMITTEE**

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064-1802
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer	Occupation
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

**Transaction ID : SA11C.13696**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AFLAC, INC. PAC**

Mailing Address 1932 WYNNNTON ROAD

City COLUMBUS	State GA	Zip Code 31999-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11C.13868**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALLSTATE INSURANCE COMPANY PAC**

Mailing Address 2775 SANDERS ROAD  
SUITE A2W

City NORTHBROOK	State IL	Zip Code 60062-6110
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040253

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 16 / 2019

**Transaction ID : SA11C.13680**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**AMERICAN COUNCIL OF LIFE INSURERS PAC**

Mailing Address 101 CONSTITUTION AVE NW  
SUITE 700

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 16 / 2019

**Transaction ID : SA11C.13682**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL PAC**

Mailing Address 1111 14TH STREET, N.W.  
SUITE 1100

City WASHINGTON State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11C.13866**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 EIGHTEENTH STREET NW  
SUITE 300

City WASHINGTON State DC Zip Code 20006-5526

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

**Transaction ID : SA11C.13702**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> 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 26 OF 101	
<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)  
**AMERICAN INSTITUTE OF CPAS PAC**

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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2019

**Transaction ID : SA11C.13651**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN INSTITUTE OF CPAS PAC**

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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2019

**Transaction ID : SA11C.13725**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC (TIPAC)**

Mailing Address 1800 M ST, NW  
SUITE 300S

City WASHINGTON State DC Zip Code 20036-5830

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

**Transaction ID : SA11C.13694**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6500.00
<b>TOTAL</b> 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 101  
(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)  
**AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION PAC**

Mailing Address 8700 WEST BRYN MAWR  
SUITE 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2019

**Transaction ID : SA11C.13731**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION PAC**

Mailing Address 8700 WEST BRYN MAWR  
SUITE 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019

**Transaction ID : SA11C.13749**

Amount of Each Receipt this Period  
3000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG State IL Zip Code 60173-4973

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2019

**Transaction ID : SA11C.13650**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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 28 OF 101	
	<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)  
**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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

**Transaction ID : SA11C.13660**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS PAC**

Mailing Address 440 FIRST STREET, N.W.  
SUITE 200

City WASHINGTON State DC Zip Code 20001-2376

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11C.13870**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AT&T, INC. FEDERAL PAC**

Mailing Address 208 SOUTH AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

**Transaction ID : SA11C.13671**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> 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 29 OF 101	
	<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)  
**BAKER & HOSTETLER PAC**

Mailing Address 1050 CONNECTICUT AVENUE, N.W.,  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20036-5318
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00174227

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3696.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2019

**Transaction ID : SA11C.13734**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BANCORPSOUTH BANK PAC**

Mailing Address P.O. BOX 789

City TUPELO	State MS	Zip Code 38802-0789
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00183962

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13666**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BANK POLICY INSTITUTE PAC**

Mailing Address 600 13TH STREET, N.W.  
SUITE 400

City WASHINGTON	State DC	Zip Code 20005-3008
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00193177

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13662**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 5500.00
<b>TOTAL</b> 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 30 OF 101
<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)  
**BARCLAYS GROUP US INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2099 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20006-6800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00448852

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 16 / 2019

**Transaction ID : SA11C.13684**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES SCHWAB CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 325 7TH STREET NW, SUITE 200

City WASHINGTON	State DC	Zip Code 20004-2809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370114

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

**Transaction ID : SA11C.13695**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHICAGO BOARD OPTIONS EXCHANGE PAC**

Mailing Address 400 S. LASALLE STREET

City CHICAGO	State IL	Zip Code 60605-1023
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00100693

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13755**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> 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 31 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**CHICKASAW NATION PAC**

Mailing Address 2020 LONNIE ABBOTT BLVD

City ADA	State OK	Zip Code 74820-9255
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C90007923

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13742**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHUBB GROUP HOLDINGS INC PAC**

Mailing Address 436 WALNUT STREET  
WAO4P

City PHILADELPHIA	State PA	Zip Code 19106-3703
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00348938

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11C.13872**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CITIGROUP INC. PAC**

Mailing Address 1101 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004-2504
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00008474

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13751**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> 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 32 OF 101	
	<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)  
**CME GROUP INC. PAC**

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2019

**Transaction ID : SA11C.13683**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2019

**Transaction ID : SA11C.13737**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL PAC**

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA	State PA	Zip Code 19103-2833
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2019

**Transaction ID : SA11C.13609**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 5500.00
<b>TOTAL</b> 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 33 OF 101  
(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)  
**COMCAST CORPORATION & NBCUNIVERSAL PAC**

Mailing Address 1701 JOHN F KENNEDY BLVD

City PHILADELPHIA State PA Zip Code 19103-2833

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019

**Transaction ID : SA11C.13740**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COMERICA INC. PAC**

Mailing Address 3551 W HAMLIN RD

City AUBURN HILLS State MI Zip Code 48326-2852

FEC ID number of contributing federal political committee. **C** C00393173

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019

**Transaction ID : SA11C.13698**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CONSUMER BANKERS ASSOCIATION PAC**

Mailing Address 1225 EYE STREET, NW, SUITE 550

City WASHINGTON State DC Zip Code 20005-5993

FEC ID number of contributing federal political committee. **C** C00035535

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2019

**Transaction ID : SA11C.13869**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 34 OF 101  
(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. DEPOSITORY TRUST & CLEARING CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1455 PENNSYLVANIA AVE., NW  
 SUITE 725  
 City WASHINGTON State DC Zip Code 20004-1036  
 FEC ID number of contributing federal political committee. **C** C00497917  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019  
**Transaction ID : SA11C.13697**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 CONTRIBUTION

**B. ELECTRONIC TRANSACTIONS ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1620 L STREET NW  
 SUITE 1020  
 City WASHINGTON State DC Zip Code 20036-5629  
 FEC ID number of contributing federal political committee. **C** C00548198  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019  
**Transaction ID : SA11C.13750**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 CONTRIBUTION

**C. ENERGY CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 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: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019  
**Transaction ID : SA11C.13661**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4000.00  
**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 35 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**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: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019

**Transaction ID : SA11C.13693**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EQUIFAX INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1550 PEACHTREE ST NW

City ATLANTA	State GA	Zip Code 30309-2402
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00143867

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2019

**Transaction ID : SA11C.13732**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG PAC**

Mailing Address 1101 NEW YORK AVENUE NW

City WASHINGTON	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227744

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2019

**Transaction ID : SA11C.13649**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2000.00
<b>TOTAL</b> 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 36 OF 101	
	<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)  
**ERNST & YOUNG PAC**

Mailing Address 1101 NEW YORK AVENUE NW

City WASHINGTON	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227744

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2019

**Transaction ID : SA11C.13652**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FARM CREDIT PAC**

Mailing Address 50 F STREET NW  
SUITE 900

City WASHINGTON	State DC	Zip Code 20001-1530
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00193631

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

**Transaction ID : SA11C.13606**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FIRST AMERICAN FINANCIAL CORPORATION PAC**

Mailing Address 1 FIRST AMERICAN WAY

City SANTA ANA	State CA	Zip Code 92707-5913
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00346726

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13747**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6500.00
<b>TOTAL</b> 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 37 OF 101  
(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)  
**FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)**

Mailing Address 200 SEAPORT BOULEVARD, V9B

City BOSTON State MA Zip Code 02210-2031

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2019

**Transaction ID : SA11C.13733**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL PAC**

Mailing Address 101 CONSTITUTION AVENUE, N.W.  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2019

**Transaction ID : SA11C.13647**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HUCK PAC**

Mailing Address P.O. BOX 2008

City LITTLE ROCK State AR Zip Code 72203-2008

FEC ID number of contributing federal political committee. **C** C00448373

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019

**Transaction ID : SA11C.13703**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

**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 38 OF 101	
	<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)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON	State DC	Zip Code 20001-6707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00022343

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 16 / 2019

**Transaction ID : SA11C.13681**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON	State DC	Zip Code 20001-6707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00022343

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 29 / 2019

**Transaction ID : SA11C.13867**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INVESCO HOLDING COMPANY (US), INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1555 PEACHTREE STREET, NE STE 1800

City ATLANTA	State GA	Zip Code 30309-2499
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00253369

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 23 / 2019

**Transaction ID : SA11C.13656**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> 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 39 OF 101  
(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)  
**INVESCO HOLDING COMPANY (US), INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1555 PEACHTREE STREET, NE  
STE 1800

City ATLANTA State GA Zip Code 30309-2499

FEC ID number of contributing federal political committee. **C** C00253369

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13669**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2019

**Transaction ID : SA11C.13707**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2019

**Transaction ID : SA11C.13709**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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 40 OF 101	
	<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)  
**INVESTMENT ADVISER ASSOCIATION PAC**

Mailing Address 1050 17TH ST NW SUITE 725

City WASHINGTON	State DC	Zip Code 20036-5514
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00440826

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13752**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COM**

Mailing Address 1 CORPORATE WAY

City LANSING	State MI	Zip Code 48951-1001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00686055

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

**Transaction ID : SA11C.13658**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KING & SPALDING NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT**

Mailing Address 1180 PEACHTREE STREET

City ATLANTA	State GA	Zip Code 30309-3531
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00204453

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

**Transaction ID : SA11C.13859**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> 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 41 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC**

Mailing Address 1801 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006-1301
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2019

**Transaction ID : SA11C.13638**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC**

Mailing Address 1801 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006-1301
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2019

**Transaction ID : SA11C.13646**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC**

Mailing Address 1801 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006-1301
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2019

**Transaction ID : SA11C.13653**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 42 OF 101	
	<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)  
**LIBERTY MUTUAL INSURANCE CO PAC**

Mailing Address 175 BERKELEY ST

City BOSTON	State MA	Zip Code 02116-5066
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00171843

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

**Transaction ID : SA11C.13753**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** 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: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2019

**Transaction ID : SA11C.13648**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LPL FINANCIAL LLC PAC**

Mailing Address 75 STATE ST  
24TH FLOOR

City BOSTON	State MA	Zip Code 02109-1827
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00486217

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA11C.13871**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> 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 43 OF 101  
(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)  
**LSEG US HOLDCO INC. PAC (LSEG US PAC)**

Mailing Address 1270 6TH AVE  
28TH FL

City NEW YORK State NY Zip Code 10020-1803

FEC ID number of contributing federal political committee. **C** C00640243

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2019

**Transaction ID : SA11C.13739**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MASTERCARD INTERNATIONAL INC. EMPLOYEES' PAC**

Mailing Address 1401 I STREET, NW  
STE. 1030

City WASHINGTON State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019

**Transaction ID : SA11C.13754**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MASTERCARD INTERNATIONAL INC. EMPLOYEES' PAC**

Mailing Address 1401 I STREET, NW  
STE. 1030

City WASHINGTON State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2019

**Transaction ID : SA11C.13757**

Amount of Each Receipt this Period  
750.00

Memo Item CONTRIBUTION  
IN-KIND EVENT SUPPLIES

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5250.00

**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 44 OF 101	
	<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)  
**MAVERICK PAC USA**

Mailing Address C/O RED CURVE SOLUTIONS  
138 CONANT STREET

City BEVERLY State MA Zip Code 01915-1665

FEC ID number of contributing federal political committee. **C** C00427435

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11C.13748

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MORTGAGE BANKERS ASSOCIATION PAC**

Mailing Address 1919 M ST NW

City WASHINGTON State DC Zip Code 20036-3521

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2019

Transaction ID : SA11C.13692

Amount of Each Receipt this Period  
3000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMIT**

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

Transaction ID : SA11C.13659

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> 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 45 OF 101	
	<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)  
**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: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2019

**Transaction ID : SA11C.13863**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION PAC**

Mailing Address 1101 KING ST SUITE 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13668**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION PAC**

Mailing Address 1101 KING ST SUITE 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2019

**Transaction ID : SA11C.13741**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3500.00
<b>TOTAL</b> 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 46 OF 101	
	<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)  
**NATIONAL RIFLE ASSOCIATION POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2019

**Transaction ID : SA11C.13686**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL TELECOMMUNICATIONS COOP ASSOC RURAL BROADBAND PAC**

Mailing Address 4121 WILSON BLVD  
STE 1000

City ARLINGTON	State VA	Zip Code 22203-4145
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004473

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2019

**Transaction ID : SA11C.13672**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONWIDE MUTUAL INSURANCE CO FINANCIAL & INVESTMENTS PAC**

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** C00406215

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2019

**Transaction ID : SA11C.13701**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> 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 47 OF 101
	<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)  
**NAVIENT CORPORATION PAC (NAVIENT PAC)**

Mailing Address 2001 EDMUND HALLEY DR.  
V224A

City RESTON	State VA	Zip Code 20191-1132
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00331835

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 12 / 2019

**Transaction ID : SA11C.13674**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS PAC**

Mailing Address 600 13TH ST NW  
STE 1000

City WASHINGTON	State DC	Zip Code 20005-3005
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107235

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

**Transaction ID : SA11C.13864**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS PAC**

Mailing Address 600 13TH ST NW  
STE 1000

City WASHINGTON	State DC	Zip Code 20005-3005
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107235

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

**Transaction ID : SA11C.13865**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> 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 48 OF 101	
	<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)  
**PRUDENTIAL FINANCIAL INC. FEDERAL PAC**

Mailing Address 751 BROAD ST

City NEWARK	State NJ	Zip Code 07102-3714
----------------	-------------	------------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2019

**Transaction ID : SA11C.13736**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**QUICKEN LOANS INC PAC**

Mailing Address 101 S WASHINGTON SQUARE STE. 620

City LANSING	State MI	Zip Code 48933-1708
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00388827

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : SA11C.13726**

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**QUICKEN LOANS INC PAC**

Mailing Address 101 S WASHINGTON SQUARE STE. 620

City LANSING	State MI	Zip Code 48933-1708
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00388827

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : SA11C.13727**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> 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 49 OF 101	
	<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. QUICKEN LOANS INC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 S WASHINGTON SQUARE  
 STE. 620  
 City LANSING State MI Zip Code 48933-1708  
 FEC ID number of contributing federal political committee. **C** C00388827  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2019  
**Transaction ID : SA11C.13738**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**B. STATE STREET BANK & TRUST COMPANY VOLUNTARY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 5351  
 City BOSTON State MA Zip Code 02206-5351  
 FEC ID number of contributing federal political committee. **C** C00072751  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2019  
**Transaction ID : SA11C.13677**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C. THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC**  
 Full Name (Last, First, Middle Initial)  
 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: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2019  
**Transaction ID : SA11C.13637**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> 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 50 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2019

Transaction ID : SA11C.13655

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** 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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

Transaction ID : SA11C.13667

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE GRANT THORNTON LLP PAC**

Mailing Address 171 N. CLARK STREET  
SUITE 200

City CHICAGO State IL Zip Code 60601-3370

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2019

Transaction ID : SA11C.13642

Amount of Each Receipt this Period  
1750.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4250.00

**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 51 OF 101	
	<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)  
**THE HARTFORD FINANCIAL SERVICES GROUP, INC. PAC**

Mailing Address **ONE HARTFORD PLAZA**

City <b>HARTFORD</b>	State <b>CT</b>	Zip Code <b>06155-0001</b>
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00168864**

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 17 / 2019

**Transaction ID : SA11C.13699**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

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

Mailing Address **801 PENNSYLVANIA AVE NW  
STE 720**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004-2686</b>
---------------------------	--------------------	-------------------------------

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

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 16 / 2019

**Transaction ID : SA11C.13691**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TRANS UNION LLC PAC**

Mailing Address **555 WEST ADAMS ST**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60661-3719</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00313700**

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 01 / 2019

**Transaction ID : SA11C.13670**

Amount of Each Receipt this Period

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="5000.00"/>

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

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

FOR LINE NUMBER: PAGE 52 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13663**

Amount of Each Receipt this Period  
1000.00

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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2019

**Transaction ID : SA11C.13664**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**U.S. MORTGAGE INSURERS PAC (USMI PAC)**

Mailing Address 1101 17TH STREET NW STE 700

City WASHINGTON State DC Zip Code 20036-4741

FEC ID number of contributing federal political committee. **C** C00702050

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2019

**Transaction ID : SA11C.13643**

Amount of Each Receipt this Period  
1500.00

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 53 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2019

**Transaction ID : SA11C.13654**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VISA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 325 7TH STREET NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20004-2801
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00365122

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2019

**Transaction ID : SA11C.13735**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WEBSTER BANK PAC - FEDERAL**

Mailing Address 145 BANK STREET

City WATERBURY	State CT	Zip Code 06702-2211
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00321406

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2019

**Transaction ID : SA11C.13665**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	152000.00

**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 54 OF 101
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <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)  
**TAKE BACK THE HOUSE 2020**

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00695585

Name of Employer	Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
127207.99

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2019

**Transaction ID : SA12.13758**

Amount of Each Receipt this Period  
6588.74

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B.** Full Name (Last, First, Middle Initial)  
**ANSARY, HUSHANG, , THE HONORA,**

Mailing Address WELLS FARGO PLAZA  
1000 LOUISIANA SUITE 5900

City HOUSTON	State TX	Zip Code 77002-5005
-----------------	-------------	------------------------

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

Name of Employer PARMAN CAPITAL GROUP	Occupation EXECUTIVE CHAIRMAN
--	----------------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2019

**Transaction ID : SA12.13761**

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**C.** Full Name (Last, First, Middle Initial)  
**FOSTER, PAUL, L., MR.,**

Mailing Address 123 WEST MILLS AVENUE  
STE 600

City EL PASO	State TX	Zip Code 79901-1577
-----------------	-------------	------------------------

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

Name of Employer FRANKLIN MOUNTAIN MANAGEMENT	Occupation PRESIDENT
--	-------------------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2019

**Transaction ID : SA12.13762**

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6588.74
<b>TOTAL</b> 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 55 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**MARCUS, BERNARD, , MR.,**

Mailing Address 1266 WEST PACES FERRY RD NW  
STE 615

City ATLANTA State GA Zip Code 30327-2306

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

Name of Employer THE MARCUS FOUNDATION Occupation PHILANTHROPIST

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 26 / 2019

Transaction ID : SA12.13759

Amount of Each Receipt this Period  
1724.13

Memo Item  
TRANSFER  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**B.** Full Name (Last, First, Middle Initial)  
**MARCUS, BILLI, , MRS.,**

Mailing Address 1266 WEST PACES FERRY RD NW  
STE 615

City ATLANTA State GA Zip Code 30327-2306

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 26 / 2019

Transaction ID : SA12.13760

Amount of Each Receipt this Period  
1724.13

Memo Item  
TRANSFER  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**C.** Full Name (Last, First, Middle Initial)  
**TAKE BACK THE HOUSE 2020**

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00695585

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
127207.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2019

Transaction ID : SA12.13763

Amount of Each Receipt this Period  
4473.88

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4473.88

**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 56 OF 101	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<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)  
**ANSARY, HUSHANG, , THE HONORA,**

Mailing Address **WELLS FARGO PLAZA**  
**1000 LOUISIANA SUITE 5900**

City **HOUSTON** State **TX** Zip Code **77002-5005**

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

Name of Employer **PARMAN CAPITAL GROUP** Occupation **EXECUTIVE CHAIRMAN**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**5600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2019**

**Transaction ID : SA12.13766**

Amount of Each Receipt this Period  
**2800.00**

Memo Item  
**TRANSFER**  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**B.** Full Name (Last, First, Middle Initial)  
**BUCKLEY, WALTER, , MR., JR**

Mailing Address **11450 TURTLE BEACH ROAD**

City **NORTH PALM BEACH** State **FL** Zip Code **33408-3343**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1244.13**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2019**

**Transaction ID : SA12.13764**

Amount of Each Receipt this Period  
**314.82**

Memo Item  
**TRANSFER**  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**C.** Full Name (Last, First, Middle Initial)  
**ESTEY, CRAIG, , MR.,**

Mailing Address **3051 ARABIAN ROAD**

City **LAS VEGAS** State **NV** Zip Code **89107-4540**

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

Name of Employer **NEVADA RESTAURANT SERVICES** Occupation **FOUNDER**

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**72.23**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2019**

**Transaction ID : SA12.13767**

Amount of Each Receipt this Period  
**72.23**

Memo Item  
**TRANSFER**  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

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

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

**0.00**



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 OF 101  
(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)  
**FOSTER, PAUL, L., MR.,**

Mailing Address 123 WEST MILLS AVENUE  
STE 600

City EL PASO State TX Zip Code 79901-1577

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

Name of Employer FRANKLIN MOUNTAIN MANAGEMENT Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2019

Transaction ID : SA12.13765

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
JFC ATTRIB: TAKE BACK THE HOUSE 2020

**B.** Full Name (Last, First, Middle Initial)  
**FINANCIAL INNOVATION COMMITTEE**

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00697656

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5901.05

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 06 / 2019

Transaction ID : SA12.13631

Amount of Each Receipt this Period  
3488.94

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**C.** Full Name (Last, First, Middle Initial)  
**ISAAC, PAUL, , MR.,**

Mailing Address 75 PROSPECT AVE

City LARCHMONT State NY Zip Code 10538-3634

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

Name of Employer ARBITER PARTNERS Occupation ANALYST

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2019

Transaction ID : SA12.13635

Amount of Each Receipt this Period  
1250.00

Memo Item  
TRANSFER  
JFC ATTRIB: FINANCIAL INNOVATION COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3488.94
<b>TOTAL</b> 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 58 OF 101  
(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)  
**SINGER, PAUL, , ,**

Mailing Address 1 WEST 81ST STREET

City NEW YORK State NY Zip Code 10024-6048

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

Name of Employer EMC Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2019

Transaction ID : SA12.13634

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
JFC ATTRIB: FINANCIAL INNOVATION COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**FINANCIAL INNOVATION COMMITTEE**

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00697656

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5901.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2019

Transaction ID : SA12.13632

Amount of Each Receipt this Period  
2412.11

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**C.** Full Name (Last, First, Middle Initial)  
**SINGER, PAUL, , ,**

Mailing Address 1 WEST 81ST STREET

City NEW YORK State NY Zip Code 10024-6048

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

Name of Employer EMC Occupation PRESIDENT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2019

Transaction ID : SA12.13636

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
JFC ATTRIB: FINANCIAL INNOVATION COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2412.11
<b>TOTAL</b> This Period (last page this line number only).....▶	16963.67

**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 101	
	<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) <b>A. BENNETT, BROOKE, , MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2019	
Mailing Address 4511 4TH STREET SOUTH			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22204	Amount of Each Disbursement this Period 1655.46	
Purpose of Disbursement REIMBURSEMENT - SEE MEMO ITEMS			Transaction ID : SB17.I6598	
Candidate Name			<input type="checkbox"/> Memo Item SEE MEMO ITEMS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ALAMO</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2019	
Mailing Address 15 TRANSPORTATION WAY			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02128	Amount of Each Disbursement this Period 216.59	
Purpose of Disbursement TRAVEL - RENTAL CAR			Transaction ID : SB17.I6608	
Candidate Name			<input checked="" type="checkbox"/> Memo Item TRAVEL REIMBURSEMENT - ITEMIZED	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2019	
Mailing Address 800 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 19.01	
Purpose of Disbursement TRAVEL - TRANSPORTATION			Transaction ID : SB17.I6599	
Candidate Name			<input checked="" type="checkbox"/> Memo Item TRAVEL REIMBURSEMENT - ITEMIZED	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1655.46
<b>TOTAL</b> 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 101	
	<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) <b>A. WEST STREET HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2019	
Mailing Address 50 WEST STREET			FEC Identification Number C	
City BAR HARBOR	State ME	Zip Code 04609	Amount of Each Disbursement this Period 1262.22	
Purpose of Disbursement TRAVEL - LODGING		Category/Type	Transaction ID : SB17.I6605	
Candidate Name		Memo Item <input checked="" type="checkbox"/> TRAVEL REIMBURSEMENT - ITEMIZED		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LANIER, CATHERINE, L, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2019	
Mailing Address 3901 FOXCROFT ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72227	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17.I6481	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. LANIER, CATHERINE, L, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2019	
Mailing Address 3901 FOXCROFT ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72227	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17.I6524	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> 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 101			
	<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) <b>A. LANIER, CATHERINE, L, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019		
Mailing Address 3901 FOXCROFT ROAD			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72227			
Purpose of Disbursement PAYROLL			Transaction ID : <b>SB17.I6540</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. LANIER, CATHERINE, L, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019		
Mailing Address 3901 FOXCROFT ROAD			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72227			
Purpose of Disbursement PAYROLL			Transaction ID : <b>SB17.I6544</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. RICKELS, DONNA, MISSY, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019		
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72207			
Purpose of Disbursement TRAVEL - MILEAGE			Transaction ID : <b>SB17.I6474</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6061.48
<b>TOTAL</b> 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 62 OF 101	
	<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) <b>A. RICKELS, DONNA, MISSY, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2019	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 1592.50	
Purpose of Disbursement PAYROLL		Candidate Name	Transaction ID : SB17.I6525	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. RICKELS, DONNA, MISSY, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 1995.50	
Purpose of Disbursement PAYROLL		Candidate Name	Transaction ID : SB17.I6541	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. RICKELS, DONNA, MISSY, MRS.,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019	
Mailing Address 311 MCMILLEN TRAIL			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 1963.00	
Purpose of Disbursement PAYROLL		Candidate Name	Transaction ID : SB17.I6545	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5551.00
<b>TOTAL</b> 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 63 OF 101			
	<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) <b>A. ADVANCE PRINT SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019		
Mailing Address 4201 S. SHACKLEFORD SUITE C			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72204	Amount of Each Disbursement this Period 3011.41		
Purpose of Disbursement PRINTING SERVICES		Category/ Type	Transaction ID : SB17.I6477		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ADVANCE PRINT SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019		
Mailing Address 4201 S. SHACKLEFORD SUITE C			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72204	Amount of Each Disbursement this Period 478.24		
Purpose of Disbursement PRINTING SERVICES		Category/ Type	Transaction ID : SB17.I6559		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ADVANCE PRINT SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019		
Mailing Address 4201 S. SHACKLEFORD SUITE C			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72204	Amount of Each Disbursement this Period 86.64		
Purpose of Disbursement PRINTING SERVICES		Category/ Type	Transaction ID : SB17.I6570		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3576.29
<b>TOTAL</b> 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 64 OF 101	
	<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. ADVANCE PRINT SOLUTIONS**

Full Name (Last, First, Middle Initial)  
Mailing Address 4201 S. SHACKLEFORD SUITE C  
City LITTLE ROCK State AR Zip Code 72204  
Purpose of Disbursement PRINTING SERVICES  
Candidate Name  
Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 09 / 23 / 2019  
FEC Identification Number: C  
Amount of Each Disbursement this Period: 695.42  
Transaction ID : SB17.I6653  
 Memo Item

**B. AT&T**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 SOUTH AKARD STREET  
City DALLAS State TX Zip Code 75202  
Purpose of Disbursement TELEPHONE SERVICES  
Candidate Name  
Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 07 / 02 / 2019  
FEC Identification Number: C  
Amount of Each Disbursement this Period: 73.58  
Transaction ID : SB17.I6473  
 Memo Item

**C. AT&T**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 SOUTH AKARD STREET  
City DALLAS State TX Zip Code 75202  
Purpose of Disbursement TELEPHONE SERVICES  
Candidate Name  
Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 07 / 05 / 2019  
FEC Identification Number: C  
Amount of Each Disbursement this Period: 199.36  
Transaction ID : SB17.I6479  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 968.36

**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 65 OF 101			
	<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) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019
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 285.53
Candidate Name		Transaction ID : SB17.I6549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019
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 73.58
Candidate Name		Transaction ID : SB17.I6550
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019
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 73.58
Candidate Name		Transaction ID : SB17.I6560
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	432.69
<b>TOTAL</b> 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 66 OF 101			
	<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) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2019
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 176.29
Candidate Name		Transaction ID : SB17.I6565
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>B. CAMPAIGN MAIL &amp; DATA, INC. DBA CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2019
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.I6521
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>C. CAMPAIGN MAIL &amp; DATA, INC. DBA CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2019
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.I6556
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2176.29
<b>TOTAL</b> 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 67 OF 101			
	<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**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I6572

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CHS BOOSTER CLUB**

Mailing Address 6300 FATHER TRIBOU DR.

City LITTLE ROCK State AR Zip Code 72205

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.I6485

Memo Item

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

Mailing Address 1701 JOHN F KENNEDY BOULEVARD

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement CABLE & INTERNET SERVICES

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 163.56

Transaction ID : SB17.I6551

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1463.56

**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 68 OF 101			
	<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) <b>A. COMCAST</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		FEC Identification Number C
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CABLE & INTERNET SERVICES		Amount of Each Disbursement this Period 138.56
Candidate Name		Transaction ID : SB17.I6561
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>B. DATAMAX</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019
Mailing Address 7400 KANIS RD		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72204
Purpose of Disbursement COPIER RENTAL		Amount of Each Disbursement this Period 18.44
Candidate Name		Transaction ID : SB17.I6484
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>C. DATAMAX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019
Mailing Address 7400 KANIS RD		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72204
Purpose of Disbursement COPIER RENTAL		Amount of Each Disbursement this Period 62.04
Candidate Name		Transaction ID : SB17.I6555
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	219.04
<b>TOTAL</b> 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 69 OF 101			
	<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) <b>A. DATAMAX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019
Mailing Address 7400 KANIS RD		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72204
Purpose of Disbursement COPIER RENTAL		Amount of Each Disbursement this Period 10.92
Candidate Name		Transaction ID : SB17.I6594
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>B. DIRECT MAIL SYSTEMS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2019
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 3572.40
Candidate Name		Transaction ID : SB17.I6557
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>C. GILMORE STRATEGY GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019
Mailing Address 1512 W 3RD ST STE 6		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement CONSULTING - GENERAL CAMPAIGN		Amount of Each Disbursement this Period 2000.00
Candidate Name		Transaction ID : SB17.I6553
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5583.32
<b>TOTAL</b> 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 70 OF 101	
	<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) <b>A. GILMORE STRATEGY GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019	
Mailing Address 1512 W 3RD ST STE 6			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72201	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONSULTING - GENERAL CAMPAIGN			Transaction ID : SB17.I6564	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. JAI LAMBERT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019	
Mailing Address 9 CONNELL DRIVE			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72205	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement GRAPHIC DESIGN SERVICES			Transaction ID : SB17.I6568	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. KVRE 92.9 FM RADIO</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019	
Mailing Address 122 DESOTO CENTER DR			FEC Identification Number C	
City HOT SPRINGS VILLAG	State AR	Zip Code 71909	Amount of Each Disbursement this Period 96.00	
Purpose of Disbursement ADVERTISING			Transaction ID : SB17.I6552	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2846.00
<b>TOTAL</b> 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 71 OF 101			
	<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) <b>A. MITCHELL WILLIAMS LAW</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2019		
Mailing Address 425 WEST CAPITOL AVENUE			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72201			
Purpose of Disbursement CONSULTING - LEGAL			Transaction ID : <b>SB17.I6563</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. NORTH PULASKI REPUBLICAN WOMEN</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019		
Mailing Address 1201 W 6TH ST			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72201			
Purpose of Disbursement EVENT TICKETS			Transaction ID : <b>SB17.I6476</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. NORTH PULASKI REPUBLICAN WOMEN</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2019		
Mailing Address 1201 W 6TH ST			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72201			
Purpose of Disbursement MEMBERSHIP DUES			Transaction ID : <b>SB17.I6593</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	380.00
<b>TOTAL</b> 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 72 OF 101	
	<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) <b>A. OFFICE DEPOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2019	
Mailing Address 2600 CANTRELL ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 280.29	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.I6610	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2019	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 100.40	
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/Type	Transaction ID : SB17.I6480	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2019	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 114.75	
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : SB17.I6482	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	495.44
<b>TOTAL</b> 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 73 OF 101			
	<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) <b>A. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 88.40		
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type	Transaction ID : SB17.I6522		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 351.33		
Purpose of Disbursement PAYROLL TAXES		Category/ Type	Transaction ID : SB17.I6523		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 88.40		
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type	Transaction ID : SB17.I6538		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	528.13
<b>TOTAL</b> 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 74 OF 101			
	<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) <b>A. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 382.15		
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : SB17.I6539		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 88.40		
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/Type	Transaction ID : SB17.I6542		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX INVESTMENT PARTNERSHIP, LP</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019		
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C		
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 379.67		
Purpose of Disbursement PAYROLL TAXES		Category/Type	Transaction ID : SB17.I6543		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	850.22
<b>TOTAL</b> 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 75 OF 101	
	<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) <b>A. PROSPECT BUILDING</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019	
Mailing Address 1501 N. UNIVERSITY AVENUE			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 409.48	
Purpose of Disbursement MONTHLY RENT		Category/ Type	Transaction ID : SB17.I6547	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PROSPECT BUILDING</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2019	
Mailing Address 1501 N. UNIVERSITY AVENUE			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 405.60	
Purpose of Disbursement MONTHLY RENT		Category/ Type	Transaction ID : SB17.I6562	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PROSPECT BUILDING</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2019	
Mailing Address 1501 N. UNIVERSITY AVENUE			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement CONFERENCE ROOM RENT		Category/ Type	Transaction ID : SB17.I6611	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	865.08
<b>TOTAL</b> 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 76 OF 101			
	<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) <b>A. RAISE THE MONEY, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019		
Mailing Address P.O. BOX 26466			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72221			
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Transaction ID : <b>SB17.I6592</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. RANEY BUILDING</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019		
Mailing Address 3600 CANTRELL RD			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72202			
Purpose of Disbursement MONTHLY RENT			Transaction ID : <b>SB17.I6548</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. RANEY BUILDING</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2019		
Mailing Address 3600 CANTRELL RD			FEC Identification Number <b>C</b>		
City LITTLE ROCK	State AR	Zip Code 72202			
Purpose of Disbursement MONTHLY RENT			Transaction ID : <b>SB17.I6558</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2840.75
<b>TOTAL</b> 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 77 OF 101	
	<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) <b>A. REPUBLICAN WOMEN'S FEDERAL FORUM</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2019
Mailing Address PO BOX 3571		FEC Identification Number C
City MERRIFIELD	State VA	Zip Code 22116
Purpose of Disbursement ANNUAL MEMEBERSHIP		Amount of Each Disbursement this Period 75.00
Candidate Name		Transaction ID : SB17.I6571
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>B. SECURITY BANKCARD</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2019
Mailing Address P.O. BOX 22116		FEC Identification Number C
City TULSA	State OK	Zip Code 74121
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Amount of Each Disbursement this Period 3456.41
Candidate Name		Transaction ID : SB17.I6487
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" 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>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2019
Mailing Address P.O. BOX 619616 MD 5675		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL - AIRFARE		Amount of Each Disbursement this Period 34.07
Candidate Name		Transaction ID : SB17.I6509
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3531.41
<b>TOTAL</b> 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 78 OF 101	
	<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) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2019
Mailing Address P.O. BOX 619616 MD 5675		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL - AIRFARE		Amount of Each Disbursement this Period 209.31
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6510
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019
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 27.90
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6519
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

Full Name (Last, First, Middle Initial) <b>C. CAPITAL HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2019
Mailing Address 111 WEST MARKHAM		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement DINNER MEETING		Amount of Each Disbursement this Period 79.49
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6494
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 79 OF 101	
	<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) <b>A. CAPITAL HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2019	
Mailing Address 111 WEST MARKHAM			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72201	Amount of Each Disbursement this Period 167.33	
Purpose of Disbursement DINNER MEETING		Category/ Type	Transaction ID : SB17.I6512	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DREAM HOTELS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019	
Mailing Address 355 WEST 16TH STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10011	Amount of Each Disbursement this Period 346.61	
Purpose of Disbursement TRAVEL - LODGING		Category/ Type	Transaction ID : SB17.I6506	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DREAM HOTELS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2019	
Mailing Address 355 WEST 16TH STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10011	Amount of Each Disbursement this Period 346.61	
Purpose of Disbursement TRAVEL - LODGING		Category/ Type	Transaction ID : SB17.I6507	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 80 OF 101	
	<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) <b>A. JALEO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019
Mailing Address 480 7TH STREET NORTHWEST		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement FUNDRAISING EVENT - CATERING		Amount of Each Disbursement this Period 218.60
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6492
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

Full Name (Last, First, Middle Initial) <b>B. KAWI</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2019
Mailing Address 20 HUDSON BOULEVARD 5TH FLOOR		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10001
Purpose of Disbursement FUNDRAISING EVENT - CATERING		Amount of Each Disbursement this Period 229.44
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6503
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019
Mailing Address 512 MEANS STREET, SUITE 404		FEC Identification Number C
City ALTANTA	State GA	Zip Code 30318
Purpose of Disbursement DIRECT MAIL SERVICES		Amount of Each Disbursement this Period 40.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6490
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 81 OF 101	
	<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) <b>A. MARRIOTT HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019
Mailing Address 700 ALICEANNA ST		FEC Identification Number C
City BALTIMORE	State MD	Zip Code 21202
Purpose of Disbursement TRAVEL - LODGING		Amount of Each Disbursement this Period 266.27
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6504 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019
Mailing Address 700 ALICEANNA ST		FEC Identification Number C
City BALTIMORE	State MD	Zip Code 21202
Purpose of Disbursement TRAVEL - LODGING		Amount of Each Disbursement this Period 297.26
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6505 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MEDIUM RARE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019
Mailing Address 3500 CONNECTICUT AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20008
Purpose of Disbursement DINNER MEETING		Amount of Each Disbursement this Period 172.98
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6491 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 82 OF 101	
	<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. MEMBERS' DINING ROOM**

Full Name (Last, First, Middle Initial)  
Mailing Address **US HOUSE OF REPRESENTATIVES STE 20**

City **WASHINGTON** State **DC** Zip Code **20515**

Purpose of Disbursement  
**LUNCH MEETING**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**07 / 16 / 2019**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**221.30**

Transaction ID : **SB17.I6514**

Memo Item **ITEMIZED CREDIT CARD PAYMENT**  
7/19/2019

**B. UBER**

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

City **SAN FRANCISCO** State **CA** Zip Code **94102**

Purpose of Disbursement  
**TRAVEL - TRANSPORTATION**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**07 / 03 / 2019**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**8.79**

Transaction ID : **SB17.I6493**

Memo Item **ITEMIZED CREDIT CARD PAYMENT**  
7/19/2019

**C. UBER**

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

City **SAN FRANCISCO** State **CA** Zip Code **94102**

Purpose of Disbursement  
**TRAVEL - TRANSPORTATION**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**07 / 09 / 2019**

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
**11.61**

Transaction ID : **SB17.I6495**

Memo Item **ITEMIZED CREDIT CARD PAYMENT**  
7/19/2019

**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 83 OF 101	
	<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) <b>A. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2019
Mailing Address 800 MARKET STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94102
Purpose of Disbursement TRAVEL - TRANSPORTATION		Amount of Each Disbursement this Period 11.90
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6511
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2019
Mailing Address P.O. BOX 22116		FEC Identification Number C
City TULSA	State OK	Zip Code 74121
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Amount of Each Disbursement this Period 1725.61
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6526
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2019
Mailing Address P.O. BOX 619616 MD 5675		FEC Identification Number C
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL - AIRFARE		Amount of Each Disbursement this Period 564.30
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6531
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 7/19/2019

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1725.61
<b>TOTAL</b> 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 84 OF 101	
	<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) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2019	
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 564.30	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6532	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DELTA AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019	
Mailing Address P.O. BOX 20706			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30320	Amount of Each Disbursement this Period 343.30	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6532	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. KROGER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019	
Mailing Address 14000 CANTRELL RD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72223	Amount of Each Disbursement this Period 9.69	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	Transaction ID : SB17.I6532	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 85 OF 101	
	<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) <b>A. OFFICE DEPOT, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019	
Mailing Address 2600 CANTRELL ROAD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 30.84	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.I6537	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TAZIKIS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2019	
Mailing Address 724 OAK ST			FEC Identification Number C	
City CONWAY	State AR	Zip Code 72032	Amount of Each Disbursement this Period 33.66	
Purpose of Disbursement DINNER MEETING		Category/Type	Transaction ID : SB17.I6533	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. US POSTAL SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2019	
Mailing Address 5420 KAVANAUGH BOULEVARD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 143.00	
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : SB17.I6534	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 86 OF 101	
	<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) <b>A. US POSTAL SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2019	
Mailing Address 5420 KAVANAUGH BOULEVARD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 2.50	
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : SB17.I6535	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 7/19/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019	
Mailing Address P.O. BOX 22116			FEC Identification Number C	
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 940.12	
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I6573	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2019	
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 254.50	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6580	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	940.12
<b>TOTAL</b> 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 87 OF 101	
	<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) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2019	
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 352.50	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6581	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2019	
Mailing Address 208 SOUTH AKARD STREET			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75202	Amount of Each Disbursement this Period 27.90	
Purpose of Disbursement PHONE SERVICES		Category/ Type	Transaction ID : SB17.I6586	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019	
Mailing Address 512 MEANS STREET, SUITE 404			FEC Identification Number C	
City ALTANTA	State GA	Zip Code 30318	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement DIRECT MAIL SERVICES		Category/ Type	Transaction ID : SB17.I6574	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 88 OF 101			
	<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) <b>A. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2019		
Mailing Address 800 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 18.01		
Purpose of Disbursement TRAVEL - TRANSPORTATION		Category/ Type	Transaction ID : SB17.I6575		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019		
Mailing Address 800 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 10.24		
Purpose of Disbursement TRAVEL - TRANSPORTATION		Category/ Type	Transaction ID : SB17.I6577		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2019		
Mailing Address 800 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 20.26		
Purpose of Disbursement TRAVEL - TRANSPORTATION		Category/ Type	Transaction ID : SB17.I6579		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 89 OF 101			
	<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) <b>A. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2019		
Mailing Address 800 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 5.00		
Purpose of Disbursement TRAVEL - TRANSPORTATION		Category/Type	Transaction ID : SB17.I6582		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2019		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 10.41		
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/Type	Transaction ID : SB17.I6587		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. US POSTAL SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2019		
Mailing Address 5420 KAVANAUGH BOULEVARD			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 4.05		
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : SB17.I6590		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10.41
<b>TOTAL</b> 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 90 OF 101	
	<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) <b>A. US POSTAL SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2019	
Mailing Address 5420 KAVANAUGH BOULEVARD			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 6.36	
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : SB17.I6591	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 8/12/2019		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019	
Mailing Address P.O. BOX 22116			FEC Identification Number C	
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 907.90	
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I6622	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2019	
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 260.30	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6623	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	907.90
<b>TOTAL</b> 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 91 OF 101	
	<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) <b>A. DELTA AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2019	
Mailing Address P.O. BOX 20706			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30320	Amount of Each Disbursement this Period 449.50	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type	Transaction ID : SB17.I6624	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2019	
Mailing Address P.O. BOX 22116			FEC Identification Number C	
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 4470.72	
Purpose of Disbursement ITEMIZED CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I6629	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019	
Mailing Address 208 SOUTH AKARD STREET			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75202	Amount of Each Disbursement this Period 27.90	
Purpose of Disbursement TELEPHONE SERVICES		Category/ Type	Transaction ID : SB17.I6650	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4470.72
<b>TOTAL</b> 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 92 OF 101	
	<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) <b>A. CAPITAL HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2019
Mailing Address 111 WEST MARKHAM		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement LUNCH MEETING	Candidate Name	Amount of Each Disbursement this Period 81.68
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6631 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. CAPITAL HOTEL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2019
Mailing Address 111 WEST MARKHAM		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement BREAKFAST MEETING	Candidate Name	Amount of Each Disbursement this Period 541.82
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6635 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. CARLTON CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2019
Mailing Address 69 SAINT JAMES'S STREET LONDON SW1A 1PJ		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement VENUE RENTAL	Candidate Name	Amount of Each Disbursement this Period 2243.13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6651 <input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 93 OF 101	
	<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) <b>A. CONGRESSIONAL INSTITUTE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2019	
Mailing Address 1700 DIAGONAL RD #730			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 765.00	
Purpose of Disbursement REPUBLICAN RETREAT		Category/ Type	Transaction ID : SB17.I6637	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CONSOLATA HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2019	
Mailing Address 52 RUA FRANCISCO MARTO			FEC Identification Number C	
City	State	Zip Code 02495	Amount of Each Disbursement this Period 87.89	
Purpose of Disbursement TRAVEL - LODGING		Category/ Type	Transaction ID : SB17.I6640	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CONSOLATA HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2019	
Mailing Address 52 RUA FRANCISCO MARTO			FEC Identification Number C	
City	State	Zip Code 02495	Amount of Each Disbursement this Period 446.16	
Purpose of Disbursement TRAVEL - LODGING		Category/ Type	Transaction ID : SB17.I6641	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 94 OF 101			
	<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) <b>A. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2019
Mailing Address 512 MEANS STREET, SUITE 404		FEC Identification Number C
City ALTANTA	State GA	Zip Code 30318
Purpose of Disbursement DIRECT MAIL SERVICES		Amount of Each Disbursement this Period 40.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6630
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2019
Mailing Address P.O. BOX 22116		FEC Identification Number C
City TULSA	State OK	Zip Code 74121
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 0.87
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6644
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19

Full Name (Last, First, Middle Initial) <b>C. SECURITY BANKCARD</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2019
Mailing Address P.O. BOX 22116		FEC Identification Number C
City TULSA	State OK	Zip Code 74121
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 4.46
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I6645
State: District:		<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 95 OF 101			
	<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) <b>A. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2019		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 0.10		
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I6646		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2019		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 0.08		
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I6647		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SECURITY BANKCARD</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2019		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 22.43		
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I6649		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 9/13/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 96 OF 101			
	<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) <b>A. THE ARKANSAS FEDERATION OF YOUNG REPUBLICANS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019		
Mailing Address P.O. BOX 2474			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72203	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/Type	Transaction ID : SB17.I6486		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. THE METROPOLITAN CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2019		
Mailing Address 1700 H ST. NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Disbursement this Period 539.00		
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I6595		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. THE METROPOLITAN CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2019		
Mailing Address 1700 H ST. NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Disbursement this Period 50.60		
Purpose of Disbursement LUNCH MEETING		Category/Type	Transaction ID : SB17.I6597		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1089.60
<b>TOTAL</b> 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 97 OF 101	
	<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) <b>A. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2019	
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 3204.62	
Purpose of Disbursement ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS			Transaction ID : SB17.I6478	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AVERO, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019	
Mailing Address 235 PARK AVENUE SOUTH			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10003	Amount of Each Disbursement this Period 925.20	
Purpose of Disbursement FUNDRAISING EVENT - VENUE & CATERING			Transaction ID : SB17.I6654	
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED REIMBURSEMENT - 7/5/19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FIOLA</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2019	
Mailing Address 601 PENNSYLVANIA AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period 2279.42	
Purpose of Disbursement FUNDRAISING EVENT - VENUE & CATERING			Transaction ID : SB17.I6655	
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED REIMBURSEMENT - 7/5/19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3204.62
<b>TOTAL</b> 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 98 OF 101			
	<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) <b>A. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/Type	Transaction ID : SB17.I6554
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/Type	Transaction ID : SB17.I6566
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2617.90
Purpose of Disbursement ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS		Category/Type	Transaction ID : SB17.I6614 SEE MEMO ITEMS
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7617.90
<b>TOTAL</b> 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 99 OF 101	
	<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) <b>A. ACQUA AL 2</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2019	
Mailing Address 212 7TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 680.40	
Purpose of Disbursement FUNDRAISING EVENT - VENUE & CATERING			Transaction ID : SB17.I6618	
Candidate Name			Memo Item <input checked="" type="checkbox"/> ITEMIZED REIMBURSEMENT - 8/30/19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ACQUA AL 2</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019	
Mailing Address 212 7TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement FUNDRAISING EVENT - VENUE & CATERING			Transaction ID : SB17.I6621	
Candidate Name			Memo Item <input checked="" type="checkbox"/> ITEMIZED REIMBURSEMENT - 8/30/19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BOQUERIA</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2019	
Mailing Address 777 9TH STREET NORTHWEST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 554.40	
Purpose of Disbursement FUNDRAISING EVENT - VENUE & CATERING			Transaction ID : SB17.I6619	
Candidate Name			Memo Item <input checked="" type="checkbox"/> ITEMIZED REIMBURSEMENT - 8/30/19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 100 OF 101	
	<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) <b>A. LIAISON CAPITOL HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019	
Mailing Address 415 NEW JERSEY AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 508.10	
Purpose of Disbursement FUNDRAISING - EVENT DEPOSIT		Category/Type	Transaction ID : SB17.I6616	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED REIMBURSEMENT - 8/30/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LIAISON CAPITOL HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2019	
Mailing Address 415 NEW JERSEY AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement FUNDRAISING - EVENT DEPOSIT		Category/Type	Transaction ID : SB17.I6620	
Candidate Name		Memo Item <input checked="" type="checkbox"/> ITEMIZED REIMBURSEMENT - 8/30/19		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2019	
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/Type	Transaction ID : SB17.I6615	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> 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 101 OF 101	
	<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) <b>A. MASTERCARD INTERNATIONAL INC. EMPLOYEES' PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2019	
Mailing Address 1401 I STREET, NW STE. 1030			FEC Identification Number C C00410274	
City WASHINGTON	State DC	Zip Code 20005-2225	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	Transaction ID : SB17.13757	
Candidate Name		Memo Item IN-KIND EVENT SUPPLIES		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</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	
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) <b>C.</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	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	67741.40