## 13031134265

**FEC** 

## STATEMENT OF **ORGANIZATION**

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FORM 1							2013	OCT 30 Office Use Onl	PM 12: 08
1. NAME OF COMMITTEE (in	full)		(Check if name is changed)		nple: If typing, type the lines.		FĒ4M5	GAMAIL	
French Hill	for Ar	kansa	<b>3S</b>	1 1 1				1 1 1 1	1
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	<u> </u>	P.O. Bo	ox 7841		<del>                                     </del>			1 1 1 1	
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		Little R				LAR L		2217 	]-[]
		(	CITY A			STA	TE ▲	ZIF	P CODE ▲
COMMITTEE'S E-MAIL ADDRESS									
(Check if a is changed		electf	rench@gmail.co	<b>m</b>	<u> </u>		1 1 1	.1	
<b>3</b>	•	Optiona	al Second E-Mail Ad	ddress					
					1 1 1 1 1 1	للل		1 1 1 1	
COMMITTEE'S WEB	PAGE ADI	DRESS (	JRL)						
(Check if a is changed	address	www.el	ectfrench.com	1 1 1	1 1 1 1 1 1 1	.1 1 4	1 1 1	1 ! [ ]	1
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	'M''	-D-G / 9-7							
2. DATE 10	29		2013						
				· Joseph State Company					
3. FEC IDENTIFIC	AHON NU	NMBEH		A A A.	<u> </u>				
4. IS THIS STATEM	IENT 🔀	NEV	V (N) OR	2323	AMENDED (A)				
I certify that I have e	xamined th	is Statem	ent and to the bes	at of my k	nowledge and belief	it is true	, correct a	nd complete.	
Type or Print Name	of Treasure	Bryan	Jeffrey						
			21						
Signature of Treasure	Bryan	Jeffrey	<b>B</b> . 1			Date	10	2,9	20.13
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.									
Office Use Only					For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			FEC FO	

	FEC Fo	rm 1 (Revised 02/2009)		Page 2
		OMMITTEE		
	noidate	Committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate	te information belo	w.)
(b)	L	This committee is an authorized committee, and is NOT a principal campa information below.)	aign committee. (Co	omplete the candidate
	ne of didate	James French Hill		
	didate y Affiliati	on REP Sought: House Senate	President	State AR
	•	Bertine Brown Rency (2) Brown Provide	land	District 02
(c)		This committee supports/opposes only one candidate, and is NOT an author	norized committee.	
	ne of didate			
Pai	rty Con	nmittee:		
(d)		This committee is a (National, State or subordinate) committee of the		(Democratic, Republican, etc.) Party.
Poi	itical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization	ation on line 6.) Its o	connected organization is a
		Corporation Corporation w/o Capital	Stock	Labor Organization
		Membership Organization Trade Association		Cooperative
		tn addition, this committee is a Lobbyist/Registrant PAC.		
(f)	П	This committee supports/opposes more than one Federal candidate, and i	s NOT a separate	segregated fund or party
	land.	committee. (i.e., nonconnected committee)		
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on	line 6.)	
Joir	nt Fund	Iraising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburs committees/organizations, at least one of which is an authorized committee of		
(h)		This committee collects contributions, pays fundraising expenses and disburse committees/organizations, none of which is an authorized committee of a federal committee.	es net proceeds for eral candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser		
		•	number C	OT THE RESERVE OF THE PROPERTY
	1.	<u>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </u>		
	2.	FEC ID	number C	
	3.	FEC ID	number C	
	4.		number C	

FEC Form 1 (Revised	1 (2/2009)	Page <b>3</b>
Write or Type Committee Nar		i age u
French Hill for		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE , , , , , ,		
		<u> </u>
Mailing Address		
	CITY	71D CODE
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representative DL	eadership PAC Sponsor
. Custodian of Records: Ide	entify by name, address (phone number optional) and position of the person in po-	ossession of committee
Jillian Ya	ant	
Full Name	11300 Cantrell Road	
Mailing Address	Suite 301	<u> </u>
	Little Rock , AR , 72212	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	227 - 5800
3. <b>Treasurer</b> : List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the n , assistant treasurer).	ame and address of
Full Name Bryan Je of Treasurer	offrey	
Mailing Address	11300 Cantrell Road	
	Suite 301	
	Little Rock AR 72212	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 501 -	227 - 5800

FEC Form 1		_
-	(Revised 02/2009)	Page 4
Full Name of Designated Agent	:	
Mailing Address		
	CITY	TATE ZIP CODE
Title or Position	Telephone number	er [
safety deposit boxes	epositories: List all banks or other depositories in which the committee s or maintains funds.	, , , , , , , , , , , , , , , , , , , ,
Name of Bank, Dep	pository, etc.  Delta Trust & Bank	
ַנ	Delta Trust & Bank	
ַנ	Delta Trust & Bank	AR 72223
ַנ	Delta Trust & Bank  11700 Cantrell Road  Little Rock	
ַנ	Delta Trust & Bank  11700 Cantrell Road  Little Rock  CITY  S	
Mailing Address	Delta Trust & Bank  11700 Cantrell Road  Little Rock  CITY  S	
Mailing Address	Delta Trust & Bank  11700 Cantrell Road  Little Rock  CITY  S	
Mailing Address  Name of Bank, Dep	Delta Trust & Bank  11700 Cantrell Road  Little Rock  CITY  S	
Mailing Address  Name of Bank, Dep	Delta Trust & Bank  11700 Cantrell Road  Little Rock  CITY  Soository, etc.	

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Received from Electronic Filing Office	Date of Receipt
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PREPARER	DATE PREPARED
(8/2013)	