

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

French Hill for Arkansas

ADDRESS (number and street) ▼

PO Box 7841

Check if different than previously reported. (ACC)

Little Rock

AR

72217

2. **FEC IDENTIFICATION NUMBER** ▼

C C00551275

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

AR

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
02 / 11 / 2016

through

M M / D D / Y Y Y Y
03 / 31 / 2016

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

Type or Print Name of Treasurer Cale Turner

Signature of Treasurer Cale Turner

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
-----------------	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

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))....	239775.00	1270297.61
(b) Total Contribution Refunds (from Line 20(d))	500.00	850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	239275.00	1269447.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	124335.68	843527.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	37184.68	39200.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87151.00	804327.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	665471.77	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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).....	124700.00	664650.00
(ii) Unitemized.....	8075.00	22720.34
(iii) TOTAL of contributions from individuals ▶	132775.00	687370.34
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	107000.00	582927.27
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	239775.00	1270297.61
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	51237.12
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.)	37184.68	39200.07
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)..... ▶	276959.68	1360734.80

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	124335.68	843527.96
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	500.00	850.00
(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)).....	500.00	850.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	124835.68	844377.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	513347.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	276959.68
25. SUBTOTAL (add Line 23 and Line 24).....	790307.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	124835.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	665471.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. WALLY ALLEN

Mailing Address **2222 BEECHWOOD**

City **LITTLE ROCK** State **AR** Zip Code **72207-2024**

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

Name of Employer **GOFF AND ASSOCIATES** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4592

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BOB ALTHOFF

Mailing Address **P.O. BOX 8120**

City **LITTLE ROCK** State **AR** Zip Code **72203-8120**

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

Name of Employer **BANCORP SOUTH** Occupation **BANKING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4701

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ISABEL B. ANTHONY

Mailing Address **P.O. BOX 20129**

City **HOT SPRINGS** State **AR** Zip Code **71903-0129**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2016

Transaction ID : SA11.4621

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

3200.00

**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 6 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. JOHN ED ANTHONY

Mailing Address P.O. BOX 20129

City State Zip Code
HOT SPRINGS AR 71903-0129

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

Name of Employer Occupation
ANTHONY TIMBERLANDS LABOR MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2016

Transaction ID : SA11.4620

Amount of Each Receipt this Period
2200.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CINDY B. BALDERACH

Mailing Address 12415 COBBLESTONE DRIVE

City State Zip Code
HOUSTON TX 77024-4904

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

Name of Employer Occupation
SPRING BRANCH, I.S.D. EDUCATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4638

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES A. BANKS

Mailing Address 100 MORGAN KEEGAN DRIVE, SUITE 100

City State Zip Code
LITTLE ROCK AR 72202-2214

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

Name of Employer Occupation
BANKS LAW FIRM, P.L.L.C. ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4557

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).....

3200.00

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

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

FOR LINE NUMBER: PAGE 7 OF 100
(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)
MR. RICK T. BEARD III

Mailing Address 425 W CAPITOL AVE SUITE 1800

City State Zip Code
LITTLE ROCK AR 72201-3525

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4543

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. DENA BENAFIELD

Mailing Address 2120 COUNTRY CLUB LN

City State Zip Code
LITTLE ROCK AR 72207-2040

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11.4763

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK BERRY

Mailing Address PO BOX 1205

City State Zip Code
OZARK AR 72949-1205

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

Name of Employer Occupation
ARKANSAS MILITARY DEPARTMENT DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : SA11.4630

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

1250.00

**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 8 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. BOB BIRCH

Mailing Address **14 CREEKWOOD COVE**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72116-6394**

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

Name of Employer **HOME BANCSHARES INC.** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4660

Amount of Each Receipt this Period
 _____ **1000.00**

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SEAN BOWIE

Mailing Address **4505 OLD LAMAR AVE**

City **MEMPHIS** State **TN** Zip Code **38118-7033**

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

Name of Employer **BRYCE CORPORATION** Occupation **NATIONAL BUSINESS DEVELOPMENT MAN.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4656

Amount of Each Receipt this Period
 _____ **2500.00**

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA BOYD

Mailing Address **5714 HAWTHORNE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4310**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4712

Amount of Each Receipt this Period
 _____ **100.00**

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: (check only one)	PAGE 9 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. DEL BOYETTE

Mailing Address **225 EAST MARKHAM STREET**
SUITE 400

City **LITTLE ROCK** State **AR** Zip Code **72201-1632**

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

Name of Employer **BOYETTE STRATEGIC ADVISORS** Occupation **PRESIDENT & CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4598

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BOB G. BRAVE

Mailing Address **2719 NORTH UNIVERSITY AVENUE**

City **LITTLE ROCK** State **AR** Zip Code **72207-2738**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4575

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT BREVING

Mailing Address **1900 MALVERN AVE, 302**

City **HOT SPRINGS** State **AR** Zip Code **71901-7778**

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

Name of Employer **NATIONAL PARK MED CENTER** Occupation **SURGEON**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11.4758

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).....

1600.00

**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 100
(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)
MR. BOB BROOKS

Mailing Address 5 TALMONT PLACE

City State Zip Code
LITTLE ROCK AR 72223-9054

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

Name of Employer Occupation
ALPINE GROUP, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2016

Transaction ID : SA11.4497

Amount of Each Receipt this Period
1350.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS J. BRYCE

Mailing Address PO BOX 18338

City State Zip Code
MEMPHIS TN 38181-0338

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

Name of Employer Occupation
BRYCE CORPORATION CHAIRMAN AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4655

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION
SEE REATTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARY BETH BRYCE

Mailing Address P.O. BOX 18338

City State Zip Code
MEMPHIS TN 38181-0338

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4775

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION
REATTRIBUTION FROM SPOUSE

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

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

6350.00

**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 100
(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)
MR. THOMAS J. BRYCE

Mailing Address **PO BOX 18338**

City **MEMPHIS** State **TN** Zip Code **38181-0338**

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

Name of Employer **BRYCE CORPORATION** Occupation **CHAIRMAN AND CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4655B

Amount of Each Receipt this Period
-2500.00

Memo Item
CONTRIBUTION
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
MR. BILL BUICE

Mailing Address **20 TRACY LANE**

City **GREENBRIER** State **AR** Zip Code **72058-9342**

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

Name of Employer **FAULKNER COUNTY** Occupation **CONSTABLE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4596

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID B. BURKS

Mailing Address **816 GOLF VIEW DR**

City **SEARCY** State **AR** Zip Code **72143-4564**

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

Name of Employer **HARDING UNIVERSITY** Occupation **CHANCELLOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : SA11.4677

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).....

750.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 100

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)
MRS. NINA CAMERON

Mailing Address **PO BOX 21440**

City **LITTLE ROCK** State **AR** Zip Code **72221-1440**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11.4732

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRECK CAMPBELL

Mailing Address **1715 NORTH SPRUCE STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-5459**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4606

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDRICK K. CAMPBELL

Mailing Address **425 W CAPITOL AVE SUITE 1800**

City **LITTLE ROCK** State **AR** Zip Code **72201-3525**

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

Name of Employer **MITCHELL WILLIAMS** Occupation **ATTORNEY AT LAW**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4544

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

3050.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 100

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)
DR. JAMES W. CARR

Mailing Address **7 RIVER RIDGE ROAD**

City **SEARCY** State **AR** Zip Code **72143-7751**

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

Name of Employer **HARDING UNIVERSITY** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11.4515

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL M. CARTER

Mailing Address **8 SOLOGNE CIR**

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

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

Name of Employer **BBA CORP.** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4645

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD L. CISNE

Mailing Address **2 WOODBERRY ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72212-2742**

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

Name of Employer **HUDSON, CISNE, AND COMPANY** Occupation **C.P.A.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2016

Transaction ID : SA11.4623

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

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

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

4700.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. EARL H. CLEMMONS

Mailing Address 111 CENTER STREET

City State Zip Code
LITTLE ROCK AR 72201-4402

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

Name of Employer Occupation
STEPHENS, INC. MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11.4527

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHUCK CLIETT

Mailing Address 425 WEST CAPITOL AVENUE, SUITE 180

City State Zip Code
LITTLE ROCK AR 72201-3525

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4545

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN F. CLORUS

Mailing Address 7 ADAJA LANE

City State Zip Code
HOT SPRINGS VILLAG AR 71909-6508

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4616

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

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

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

1650.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 15 OF 100

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)
MRS. ELLON COCKRILL

Mailing Address 2305 NORTH SPRUCE

City State Zip Code
 LITTLE ROCK AR 72207-3727

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

Name of Employer Occupation
 U.A.M.S. VOLUNTEERS AND DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4726

Amount of Each Receipt this Period
 500.00

Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DONNA CONE

Mailing Address 5500 COUNTRY CLUB BOULEVARD

City State Zip Code
 LITTLE ROCK AR 72207-4517

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

Name of Employer Occupation
 HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11.4730

Amount of Each Receipt this Period
 1500.00

Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLIE CONKLIN

Mailing Address 21 SOMERSETT COURT

City State Zip Code
 ROLAND AR 72135-9039

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

Name of Employer Occupation
 ARKANSAS KIDS READ EXECUTIVE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11.4734

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).....

2500.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 16 OF 100

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)
MR. MICHAEL COULSON

Mailing Address 1434 PIKE AVE

City NORTH LITTLE ROCK State AR Zip Code 72114-4050

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

Name of Employer COULSON OIL COMPANY Occupation CHAIRMAN OF THE BOARD

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11.4532

Amount of Each Receipt this Period
 1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY CRAIN

Mailing Address 25 SOLOGNE CIRCLE

City LITTLE ROCK State AR Zip Code 72223-8913

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

Name of Employer CRAIN AUTOMOTIVE GROUP Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2016

Transaction ID : SA11.4459

Amount of Each Receipt this Period
 2000.00

Memo Item
CONTRIBUTION

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

Mailing Address 1560 W BEEBE CAPPS EXPY

City SEARCY State AR Zip Code 72143-5169

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

Name of Employer DALRYMPLE COMMERCIAL, INC Occupation REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4591

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).....

3500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. CLAIBORNE P. DEMING

Mailing Address P.O. BOX 1009

City State Zip Code
EL DORADO AR 71731-1009

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

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : SA11.4654

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES T. DYKE

Mailing Address 309 CENTER STREET

City State Zip Code
LITTLE ROCK AR 72201-2603

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

Name of Employer Occupation
DYKE INDUSTRIES, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4522

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRED EASON

Mailing Address 1920 MAIN STREET
SUITE 100

City State Zip Code
NORTH LITTLE ROCK AR 72114-2876

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

Name of Employer Occupation
SIMMONS FIRST INVESTMENT GROUP CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11.4490

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

4950.00

**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 18 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. DON ERBACH JR.

Mailing Address **8 REDCOAT LANE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2311**

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

Name of Employer **PASCHALL STRATEGIC COMMUNICATIONS** Occupation **PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11.4737

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL ESSER

Mailing Address **12555 MANCHESTER AVE**

City **ST. LOUIS** State **MO** Zip Code **63131-3710**

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

Name of Employer **EDWARD JONES** Occupation **INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4695

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAN H. FELTON III

Mailing Address **6 WEST CHESNUT STREET**

City **MARIANNA** State **AR** Zip Code **72360-2258**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY AT LAW**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2016

Transaction ID : SA11.4502

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

3950.00

**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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. CURTIS O. FERGUSON

Mailing Address 623 RIVER STREET

City State Zip Code
BENTON AR 72015-4109

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

Name of Employer Occupation
FERGUSON FURNITURE COMPANY BUSINESS MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4618

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ELMER L. FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City State Zip Code
MAUMELLE AR 72113-7402

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4727

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JO ELLEN FORD

Mailing Address 900 S SCHACKLEFORD ROAD
SUITE 200

City State Zip Code
LITTLE ROCK AR 72211-3847

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4784

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

3250.00

**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 20 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. RANDALL M. FORT

Mailing Address **2223 NORTH OAK COURT**

City **ARLINGTON** State **VA** Zip Code **22209-1120**

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

Name of Employer **RAYTHEON COMPANY** Occupation **DIRECTOR OF PROGRAM SECURITY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11.4755

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DOAK FOSTER

Mailing Address **425 WEST CAPITOL AVENUE
SUITE 1800**

City **LITTLE ROCK** State **AR** Zip Code **72201-3525**

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

Name of Employer **MITCHELL WILLIAMS LAW** Occupation **ATTORNEY AT LAW**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4547

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JANICE T. FOWLER

Mailing Address **2024 CANAL POINTE**

City **LITTLE ROCK** State **AR** Zip Code **72202-1400**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11.4692

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

1750.00

**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 100
(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)
MR. MICHAEL GALEANO

Mailing Address 6253 MUIRLOCH CT S

City State Zip Code
DUBLIN OH 43017-8794

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

Name of Employer Occupation
ALLIANCE DATA ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 26 2016

Transaction ID : SA11.4704

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL GALEANO

Mailing Address 6253 MUIRLOCH CT S

City State Zip Code
DUBLIN OH 43017-8794

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

Name of Employer Occupation
ALLIANCE DATA ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 25 2016

Transaction ID : SA11.4746

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WILLIAM GIBBS

Mailing Address 16 BLACKBERRY RD

City State Zip Code
SEARCY AR 72143-8913

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

Name of Employer Occupation
UNITY HEALTH PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 23 2016

Transaction ID : SA11.4538

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

1250.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. KEVIN GORMAN

Mailing Address 3208 MILLBROOK ROAD

City State Zip Code
LITTLE ROCK AR 72227-3046

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4699

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BARNETT GRACE

Mailing Address 5612 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-4308

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11.4684

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID W. HANNA

Mailing Address 43 POST

City State Zip Code
IRVINE CA 92618-5216

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

Name of Employer Occupation
HANNA VENTURES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2016

Transaction ID : SA11.4448

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 23 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. DAVID W. HANNA

Mailing Address 43 POST

City State Zip Code
IRVINE CA 92618-5216

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

Name of Employer Occupation
HANNA VENTURES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4449

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. VIRGINA L. HANNA

Mailing Address 43 POST

City State Zip Code
IRVINE CA 92618-5216

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

Name of Employer Occupation
HANNA CAPITAL MANAGEMENT EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4450

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINA L. HANNA

Mailing Address 43 POST

City State Zip Code
IRVINE CA 92618-5216

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

Name of Employer Occupation
HANNA CAPITAL MANAGEMENT EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4451

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 24 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MS. DEBRA WRIGHT HARRIS

Mailing Address 47 RANCH RIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72223-9674

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

Name of Employer Occupation
WILLIAM T. HARRIS, D.D.S. P.A. DENTAL HYGIENIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11.4688

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL HARVEL

Mailing Address 136 VISTA DRIVE

City State Zip Code
MOUNT IDA AR 71957-8165

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11.4673

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY HEATHCOTT

Mailing Address 300 W. MAIN STREET

City State Zip Code
LITTLE ROCK AR 72201-2804

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

Name of Employer Occupation
HEATHCOTT ASSOCIATES ADVERTISING EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4535

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 25 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. EDWIN P. HENRY

Mailing Address 7200 SEQUOYAH LANE

City NORTH LITTLE ROCK State AR Zip Code 72116-4368

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4619

Amount of Each Receipt this Period
 _____ 200.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN HOLLANSWORTH

Mailing Address 9 UTRERA LANE

City HOT SPRINGS VILLAG State AR Zip Code 71909-7895

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

Name of Employer HOLLY CLASSICS Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4698

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEVIN H. HUCHINGSON

Mailing Address 18 VALLEY CREST COURT

City LITTLE ROCK State AR Zip Code 72223-4641

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

Name of Employer K&D HUCHINGSON LIMITED PARTNERSHIP Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : SA11.4663

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item
CONTRIBUTION

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

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

_____ 1800.00

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

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

FOR LINE NUMBER: PAGE 26 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. JIM IRWIN

Mailing Address **7 RAQUET COURT**

City **LITTLE ROCK** State **AR** Zip Code **72227-2308**

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

Name of Employer **IRWIN PARTNERS** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
03 / 30 / 2016

Transaction ID : SA11.4731

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD T. JACK JR.

Mailing Address **2800 CANTRELL ROAD
SUITE 500**

City **LITTLE ROCK** State **AR** Zip Code **72202-2043**

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

Name of Employer **JACK NELSON JONES AND BRYANT** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
02 / 18 / 2016

Transaction ID : SA11.4517

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HOPE JARKOWSKI

Mailing Address **243 NORTH HIGHLAND STREET**

City **ARLINGTON** State **VA** Zip Code **22201-1250**

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

Name of Employer **DELTA STRATEGY GROUP** Occupation **PARTNER - GOVERNMENT AFFAIRS**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
03 / 01 / 2016

Transaction ID : SA11.4636

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. JIM JONES

Mailing Address **17 RIDGEVIEW DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2339**

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

Name of Employer **CREWS AND ASSOCIATES** Occupation **INVESTMENT BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4694

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HONORABLE KENNETH JUSTER

Mailing Address **20 WEST 53RD STREET
30A**

City **NEW YORK** State **NY** Zip Code **10019-6106**

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

Name of Employer **WARBURG PINCUS L.L.C.** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11.4523

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. WHITFIELD L. KNAPPLE

Mailing Address **4703 CRESTWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72207-5435**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4669

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION
 REFUNDED \$500 ON 3/14/2016

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 28 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. LEONARD KREMERS

Mailing Address 44 INVERNESS CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2928

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

Name of Employer Occupation
MID-SOUTH DIST. C.E.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4685

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN LAFRANCE JR.

Mailing Address 11 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5443

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

Name of Employer Occupation
DALE CAPITAL PARTNERS, INC. PRINCIPAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2016

Transaction ID : SA11.4653

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOEL Y. LEDBETTER

Mailing Address 106 CLAREMORE COURT

City State Zip Code
LITTLE ROCK AR 72227-3800

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

Name of Employer Occupation
BOYLE REALTY COMPANY REALTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4576

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

3200.00

**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 29 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. CARL E. LINDSEY JR.

Mailing Address **64 COUNTRY CLUB CIRCLE**

City **SEARCY** State **AR** Zip Code **72143-8904**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2016

Transaction ID : SA11.4498

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HERBERT R. MARTIN

Mailing Address **P.O. BOX 15550**

City **LITTLE ROCK** State **AR** Zip Code **72231-5550**

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

Name of Employer **GRACE OIL, L.L.C.** Occupation **OPERATING MANAGER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : SA11.4633

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD MASSEY

Mailing Address **4610 CRESTWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72207-5434**

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

Name of Employer **FIRST FEDERAL BANK** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11.4733

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 30 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. BILL MATTHEWS

Mailing Address 47 CHEVAUX CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-4297

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4594

Amount of Each Receipt this Period
 250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARVIN H. MAURRAS

Mailing Address P.O. BOX 21258

City State Zip Code
LITTLE ROCK AR 72221-1258

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2016

Transaction ID : SA11.4680

Amount of Each Receipt this Period
 1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MARILYN MCHANEY

Mailing Address 2418 N. JACKSON

City State Zip Code
LITTLE ROCK AR 72207-3716

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4639

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).....

1750.00

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

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

FOR LINE NUMBER: PAGE 31 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. BARRY MCKUIN

Mailing Address 822 EAST BURROW

City MORRILTON State AR Zip Code 72110-4409

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

Name of Employer MCKUIN PROPERTIES, L.L.C. Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4565

Amount of Each Receipt this Period
 250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN MEYER

Mailing Address 13 HENDRICKS ISLE

City FORT LAUDERDALE State FL Zip Code 33301-3702

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

Name of Employer ARISE VIRTUAL SOLUTIONS Occupation CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2016

Transaction ID : SA11.4495

Amount of Each Receipt this Period
 2700.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. VICTORIA MEYER

Mailing Address 13 HENDRICKS ISLE

City FORT LAUDERDALE State FL Zip Code 33301-3702

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

Name of Employer REGISTERED NURSE Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2016

Transaction ID : SA11.4785

Amount of Each Receipt this Period
 2700.00

Memo Item
CONTRIBUTION

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

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

5650.00

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

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

FOR LINE NUMBER: PAGE 32 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. STUART P. MILLER

Mailing Address 425 W CAPITOL AVE SUITE 1800

City State Zip Code
LITTLE ROCK AR 72201-3525

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4552

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARK MONROE

Mailing Address 11 RANCH VALLEY ROAD

City State Zip Code
LITTLE ROCK AR 72207-5138

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4521

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE MORGAN

Mailing Address 26 DUCLAIR COURT

City State Zip Code
LITTLE ROCK AR 72223-9570

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11.4491

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

1750.00

**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 33 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. JOE MORGAN

Mailing Address **26 DUCLAIR COURT**

City **LITTLE ROCK** State **AR** Zip Code **72223-9570**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4492

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON MUNRO

Mailing Address **P.O. BOX 1157**

City **HOT SPRINGS** State **AR** Zip Code **71902-1157**

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

Name of Employer **MUNRO AND COMPANY, INC.** Occupation **SHOE MANUFACTURER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 25 / 2016

Transaction ID : SA11.4674

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT MADISON MURPHY

Mailing Address **200 NORTH JEFFERSON AVENUE
SUITE 400**

City **EL DORADO** State **AR** Zip Code **71730-5854**

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

Name of Employer **SELF EMPLOYED** Occupation **PRIVATE INVESTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2016

Transaction ID : SA11.4626

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

4450.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
DR. BLAKE NORRIS

Mailing Address 2112 COUNTRY CLUB LANE

City State Zip Code
LITTLE ROCK AR 72207-2040

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

Name of Employer Occupation
ARKANSAS CARDIOLOGY PA PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4607

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN T. O'ROURKE

Mailing Address 11028 STANMORE DRIVE

City State Zip Code
POTOMAC MD 20854-1525

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11.4509

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN T. O'ROURKE

Mailing Address 11028 STANMORE DRIVE

City State Zip Code
POTOMAC MD 20854-1525

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016

Transaction ID : SA11.4640

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION
IN KIND - FUNDRAISING - FOOD & BEVERAGE

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

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

1650.00

**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 35 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
DR. RAY L. PARKER

Mailing Address **9 LONGFELLOW LANE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3749**

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

Name of Employer **DERMATOLOGY GROUP OF ARKANSAS** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11.4729

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES E. PEACOCK

Mailing Address **309 WEST MAIN STREET
SUITE 3**

City **JACKSONVILLE** State **AR** Zip Code **72076-4500**

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

Name of Employer **SELF EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4581

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EUGENE PFEIFER

Mailing Address **16300 CANTRELL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72223-4232**

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

Name of Employer **SELF EMPLOYED** Occupation **REAL ESTATE OWNER/MANAGER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2016

Transaction ID : SA11.4624

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).....

2500.00

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

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

FOR LINE NUMBER: PAGE 36 OF 100
(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)
MRS. LINDA PFEIFER

Mailing Address 16300 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72223-4232

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 27 2016

Transaction ID : SA11.4625

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILMER PLATE

Mailing Address 1101 STEEPLECHASE COVE

City State Zip Code
JACKSONVILLE AR 72076-2689

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 28 2016

Transaction ID : SA11.4711

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOEL PRITCHETT

Mailing Address 918 SKYLINE DRIVE

City State Zip Code
SEARCY AR 72143-6510

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 19 2016

Transaction ID : SA11.4585

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

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

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

1350.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MS. LYN P. PRUITT

Mailing Address 425 W CAPITOL AVE SUITE 1800

City State Zip Code
LITTLE ROCK AR 72201-3525

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4553

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LISENNE D. ROCKEFELLER

Mailing Address P.O. BOX 3157

City State Zip Code
LITTLE ROCK AR 72203-3157

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

Name of Employer Occupation
WINROCK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4646

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. PORTER R. RODGERS JR.

Mailing Address P.O. BOX 1199

City State Zip Code
SEARCY AR 72145-

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

Name of Employer Occupation
DOCTOR SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4705

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).....

4200.00

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

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

FOR LINE NUMBER: PAGE 38 OF 100
(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)
DR. PORTER R. RODGERS JR.

Mailing Address P.O. BOX 1199

City State Zip Code
SEARCY AR 72145-

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

Name of Employer Occupation
DOCTOR SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 22 2016

Transaction ID : SA11.4786

Amount of Each Receipt this Period
 1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE ROGERS

Mailing Address 5305 LITTLE FALLS RD

City State Zip Code
ARLINGTON VA 22207-1521

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

Name of Employer Occupation
WAZLER & WALKER PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 25 2016

Transaction ID : SA11.4748

Amount of Each Receipt this Period
 500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID MONTERO ROSEN

Mailing Address 251 CRADON BOULEVARD
#1026

City State Zip Code
KEY BISCAYNE FL 33149-1514

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

Name of Employer Occupation
GRAHAM AND DODD FUND, L.L.C. BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 02 2016

Transaction ID : SA11.4632

Amount of Each Receipt this Period
 200.00

Memo Item
CONTRIBUTION

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

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

1700.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. TOM SCHUECK

Mailing Address P.O. BOX 16390

City State Zip Code
LITTLE ROCK AR 72231-6390

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

Name of Employer Occupation
LEXICON, INC. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11.4505

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. SLOAN

Mailing Address 5220 STONEWALL ROAD

City State Zip Code
LITTLE ROCK AR 72207-4522

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11.4489

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TOM J. SMALL

Mailing Address 4701 HILLCREST AVENUE

City State Zip Code
LITTLE ROCK AR 72205-1911

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

Name of Employer Occupation
TOM SMALL APPRAISAL AND CONSULTING APPRAISER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4573

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).....

1250.00

**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 40 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. DERRICK W. SMITH

Mailing Address 35 COURTS DRIVE

City State Zip Code
LITTLE ROCK AR 72223-9198

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4554

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DEWITT H. SMITH

Mailing Address 1 TROUT FARM

City State Zip Code
BELLA VISTA AR 72714-3111

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

Name of Employer Occupation
DEVEREUX MANAGEMENT COMPANY REAL ESTATE MANAGEMENT & INVESTING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11.4690

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SAMUEL SMITH

Mailing Address 5155 BURNT PINE DR

City State Zip Code
CONWAY AR 72034-7497

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 23 / 2016

Transaction ID : SA11.4537

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).....

1000.00

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

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

FOR LINE NUMBER: PAGE 41 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
DR. STEPHEN SORSBY

Mailing Address 14384 NORMAN DAVIS DRIVE

City State Zip Code
ALEXANDER AR 72002-9040

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

Name of Employer Occupation
QUALCHOICE CMO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11.4735

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARTHA N. SOWELL

Mailing Address 12400 HUNTERS GLEN BOULEVARD #2

City State Zip Code
LITTLE ROCK AR 72211-2235

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11.4486

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MIKE W. SPADES JR.

Mailing Address 208 CAMBRIDGE PLACE DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2100

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

Name of Employer Occupation
MICHAEL SPADES, JR., ATTORNEY AT LAW ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4605

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

800.00

**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 42 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
DR. JOHN SPRAY

Mailing Address **616 SAINT MICHAEL PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72211-5562**

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

Name of Employer **ARKANSAS DEPARTMENT OF HEALTH** Occupation **DENTIST**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4721

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address **412 HONEY HILL ROAD**

City **SEARCY** State **AR** Zip Code **72143-9383**

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

Name of Employer **WHITE RIVER MEDICAL CENTER** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4597

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID STAGGS

Mailing Address **412 HONEY HILL ROAD**

City **SEARCY** State **AR** Zip Code **72143-9383**

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

Name of Employer **WHITE RIVER MEDICAL CENTER** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4683

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

300.00

**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 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. ROBERT P. TAYLOR

Mailing Address 17 PARKSTONE CIRCLE
129

City NORTH LITTLE ROCK State AR Zip Code 72116-7176

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2016

Transaction ID : SA11.4682

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRUCE A. THALHEIMER JR.

Mailing Address 73 ROBINWOOD DRIVE

City LITTLE ROCK State AR Zip Code 72227-2223

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

Name of Employer CHAINWHEEL, INC. Occupation TREASURER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11.4488

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFERY H. THOMAS

Mailing Address 425 WEST CAPITOL AVENUE
SUITE 1800

City LITTLE ROCK State AR Zip Code 72201-3525

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

Name of Employer MITCHELL WILLIAMS Occupation ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11.4555

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).....

1750.00

**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 44 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MS. LUCILLE R. TLAPEK

Mailing Address **1 DUCLAIR COURT**

City **LITTLE ROCK** State **AR** Zip Code **72223-9571**

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

Name of Employer **JPAC ENTERPRISES, INC.** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 25 / 2016

Transaction ID : SA11.4533

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILTON A. TREADWAY

Mailing Address **2 WESTBROOK CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72205-2259**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4719

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JIM WALTON

Mailing Address **P.O. BOX 1860**

City **BENTONVILLE** State **AR** Zip Code **72712-1860**

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

Name of Employer **ARVEST BANK** Occupation **C.E.O./CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11.4754

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

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

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

3950.00

**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 45 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MRS. LYNNE WALTON

Mailing Address **PO BOX 1860**

City **BENTONVILLE** State **AR** Zip Code **72712-1860**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11.4753

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVEN WARREN

Mailing Address **17 DURANCE DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9133**

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

Name of Employer **B.K.D., L.L.P.** Occupation **C.P.A.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 13 / 2016

Transaction ID : SA11.4460

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK WHITE

Mailing Address **PO BOX 2181**

City **LITTLE ROCK** State **AR** Zip Code **72203-2181**

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

Name of Employer **BLUE CROSS BLUE SHIELD** Occupation **PRESIDENT AND C.E.O.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11.4456

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).....

4700.00

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

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

FOR LINE NUMBER: PAGE 46 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
MR. DONALD WINTON

Mailing Address **2 INVERNESS CIR**

City **LITTLE ROCK** State **AR** Zip Code **72212-2906**

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

Name of Employer **CREWS & ASSOCIATES** Occupation **CHEIF OPERATIONS OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4587

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM WOOTEN

Mailing Address **P.O. BOX 280**

City **BEEBE** State **AR** Zip Code **72012-0280**

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

Name of Employer **WINSLOW LLC** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2016

Transaction ID : SA11.4499

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SHERRY WORTSMITH

Mailing Address **324 NORTH RIDGE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-2522**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4700

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

1250.00

**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 47 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
MR. LYNN WRIGHT

Mailing Address **301 EASY STREET**

City **LITTLE ROCK** State **AR** Zip Code **72223-5091**

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

Name of Employer **REGIONS BANK** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11.4643

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAJOR DENNIS YECKE, RETIRED

Mailing Address **139 BELLE MEADE DRIVE**

City **SEARCY** State **AR** Zip Code **72143-7037**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11.4514

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
R-G JOINT VENTURE, L.L.C.

Mailing Address **1215 REBSAMEN PARK ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72202-1819**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4717

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION
PARTNERSHIP ATTRIBUTION REQUEST

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

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

1750.00

**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 48 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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 ROYER LAW FIRM PLLC

Mailing Address **818 CONNECTICUT AVE NW**
11TH FLOOR

City **WASHINGTON** State **DC** Zip Code **20006-2702**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4749

Amount of Each Receipt this Period
 _____ **500.00**

Memo Item
CONTRIBUTION
PARTNERSHIP ATTRIBUTION REQUEST

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 M / D 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

500.00

124700.00

**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 49 OF 100
	<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	

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)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address P.O. BOX 12667

City BAKERSFIELD State CA Zip Code 93389-2667

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2016

Transaction ID : SA11.4622

Amount of Each Receipt this Period
 2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address P.O. BOX 12667

City BAKERSFIELD State CA Zip Code 93389-2667

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2016

Transaction ID : SA11.4627

Amount of Each Receipt this Period
 2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WESTERMAN FOR CONGRESS

Mailing Address PO BOX 21097

City HOT SPRINGS State AR Zip Code 71903-1097

FEC ID number of contributing federal political committee. **C** C00548180

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4666

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).....

5000.00

**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 50 OF 100
	<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	

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)
WESTERMAN FOR CONGRESS

Mailing Address PO BOX 21097

City State Zip Code
HOT SPRINGS AR 71903-1097

FEC ID number of contributing federal political committee. **C** C00548180

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4670

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
21ST CENTURY PROGRESS PAC

Mailing Address P.O. BOX 1713

City State Zip Code
LITTLE ROCK AR 72203-1713

FEC ID number of contributing federal political committee. **C** C00491027

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11.4531

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address 1120 CONNECTICUT AVENUE, N.W.
SUITE 600

City State Zip Code
WASHINGTON DC 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11.4518

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 100
	<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	

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 POLITICAL ACTION

Mailing Address 101 CONSTITUTION AVE NW
SUITE 700

City D.C. State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11.4787

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN FOREST & PAPER ASSOCIATION PAC

Mailing Address 1101 K ST NW

City WASHINGTON State DC Zip Code 20005-4210

FEC ID number of contributing federal political committee. **C** C00029348

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4659

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH STREET
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20268-0001

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4437

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).....

4500.00

**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 52 OF 100
	<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	

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 INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11.4661

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4672

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION PAC

Mailing Address **25 MASSACHUSETTS AVE NW**

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

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4520

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

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

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

3500.00

**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 53 OF 100
	<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	

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 SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 1061 AMERICAN LN

City State Zip Code
SCHAUMBURG IL 60173-4973

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : SA11.4686

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARKANSAS MEDICAL SOCIETY PAC

Mailing Address P.O. BOX 55088

City State Zip Code
LITTLE ROCK AR 72215-5088

FEC ID number of contributing federal political committee. **C C00002907**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4519

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA PAC

Mailing Address 2300 WILSON BLVD

City State Zip Code
ARLINGTON VA 22201-5424

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4603

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).....

6500.00

**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 100
	<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	

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2016

Transaction ID : SA11.4503

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address **P.O. BOX 961039**

City **FORT WORTH** State **TX** Zip Code **76161-0039**

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4742

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BROWNSTEIN HYATT FARBER SCHRECK PAC

Mailing Address **410 17TH ST**

City **DENVER** State **CO** Zip Code **80202-4402**

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11.4580

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).....

5000.00

**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 55 OF 100
	<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	

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)
CAPITAL ONE FINANCIAL CORPORATION ASSOCIATES POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE

City State Zip Code
MCLEAN VA 22102-3407

FEC ID number of contributing federal political committee. **C C00326595**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4751

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address 20 S WACKER DR

City State Zip Code
CHGO IL 60606-7431

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4744

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CMR POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

Transaction ID : SA11.4652

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

6000.00

**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 56 OF 100
	<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	

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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4665

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COMMERCIAL REAL ESTATE FINANCE COUNCIL PAC

Mailing Address 20 BROAD STREET
7TH FLOOR

City NEW YORK State NY Zip Code 10005-2601

FEC ID number of contributing federal political committee. **C C00411173**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11.4759

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CREDIT SUISSE SECURITIES (USA) LLC PAC

Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004-1217

FEC ID number of contributing federal political committee. **C C00111559**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4668

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).....

8000.00

**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 57 OF 100
	<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	

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)
DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044-0365

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11.4739

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEPOSITORY TRUST AND CLEARING CORPORATION PAC

Mailing Address 228 WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5408

FEC ID number of contributing federal political committee. **C C00497917**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11.4760

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 S TRYON ST

City CHARLOTTE State NC Zip Code 28202-4200

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4601

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 100
	<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	

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)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DR

City FALLS CHURCH State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4599

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EXPERIAN NORTH AMERICA, INC PAC

Mailing Address 475 ANTON BLVD

City COSTA MESA State CA Zip Code 92626-7037

FEC ID number of contributing federal political committee. **C C00379768**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4696

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 3435

City ALEXANDRIA State VA Zip Code 22302-0435

FEC ID number of contributing federal political committee. **C C00410068**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4664

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).....

4000.00

**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 59 OF 100
	<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	

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)
GENERAL DYNAMICS CORPORATION PAC

Mailing Address 2941 FAIRVIEW PARK DR

City State Zip Code
FALLS CHURCH VA 22042-4522

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11.4679

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GULF STATES TOYOTA INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1375 ENCLAVE PARKWAY

City State Zip Code
HOUSTON TX 77077-2026

FEC ID number of contributing federal political committee. **C C00349373**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11.4454

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
IBERIABANK CORPORATION FED PAC

Mailing Address 200 WEST CONGRESS STREET

City State Zip Code
LAFAYETTE LA 70501-6873

FEC ID number of contributing federal political committee. **C C00406066**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11.4738

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

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

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

3500.00

**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 60 OF 100
	<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	

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)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC

Mailing Address 20 F ST NW

City WASHINGTON State DC Zip Code 20001-6700

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4671

Amount of Each Receipt this Period
 1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INTERCONTINENTAL EXCHANGE INC PAC

Mailing Address 2100 RIVEREDGE PKWY STE 500

City ATLANTA State GA Zip Code 30328-4676

FEC ID number of contributing federal political committee. **C** C00443168

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4689

Amount of Each Receipt this Period
 2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JONES WALKER L.L.P. PAC

Mailing Address 201 ST CHARLES AVE

City NEW ORLEANS State LA Zip Code 70170-1000

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11.4525

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).....

4000.00

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

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

FOR LINE NUMBER: PAGE 61 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
JONES WALKER L.L.P. PAC

Mailing Address **201 ST CHARLES AVE**

City **NEW ORLEANS** State **LA** Zip Code **70170-1000**

FEC ID number of contributing federal political committee. **C C00111534**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2016

Transaction ID : SA11.4691

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JPMORGAN CHASE & CO. PAC

Mailing Address **601 PENNSYLVANIA AVE NW**

City **WASHINGTON** State **DC** Zip Code **20004-2601**

FEC ID number of contributing federal political committee. **C C00128512**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4743

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address **1095 6TH AVE**

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

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11.4528

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

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

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

4000.00

**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 62 OF 100
	<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	

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)
NATIONAL AUTOMOTIVE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 412 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11.4530

Amount of Each Receipt this Period
 5000.00

Memo Item
CONTRIBUTION

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

Mailing Address 1201 15TH STREET, N.W.

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11.4641

Amount of Each Receipt this Period
 3500.00

Memo Item
CONTRIBUTION

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

Mailing Address 3601 VINCENNES RD

City INDIANAPOLIS State IN Zip Code 46268-1154

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11.4740

Amount of Each Receipt this Period
 3000.00

Memo Item
CONTRIBUTION

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

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

11500.00

**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 63 OF 100
	<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	

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)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC

Mailing Address 100 DANGERFIELD ROAD

City State Zip Code
ALEXANDRIA VA 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4658

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATL. RIFLE ASSO. OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL RD

City State Zip Code
FAIRFAX VA 22030-7550

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11.4534

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 State Zip Code
LANSING MI 48933-1708

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4657

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 100
	<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	

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)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE

Mailing Address 801 PENNSYLVANIA AVENUE NORTHWEST
SUITE 720

City WASHINGTON State DC Zip Code 20004-2686

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11.4649

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

City WASHINGTON State DC Zip Code 20005-2623

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2016

Transaction ID : SA11.4507

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address P.O. BOX 7878
912 S POPLAR

City PINE BLUFF State AR Zip Code 71601-4861

FEC ID number of contributing federal political committee. **C C00278754**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4662

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

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

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

6000.00

**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 65 OF 100
	<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	

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)
RICELAND FOODS, INC. PAC

Mailing Address P.O. BOX 927

City State Zip Code
STUTTGART AR 72160-0927

FEC ID number of contributing federal political committee. **C C00551275**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11.4526

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSO.

Mailing Address 1101 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20005-4269

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2016

Transaction ID : SA11.4667

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FED

Mailing Address 1 STATE FARM PLAZA

City State Zip Code
BLOOMINGTON IL 61710-0001

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2016

Transaction ID : SA11.4457

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).....

6500.00

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

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

FOR LINE NUMBER: PAGE 66 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FED

Mailing Address 1 STATE FARM PLAZA

City BLOOMINGTON State IL Zip Code 61710-0001

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2016

Transaction ID : SA11.4458

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STATE STREET BANK & TRUST COMPANY VOLUNTARY PAC

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11.4747

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TEACHERS INSURANCE ANNUITY ASSO. OF AMERICA COLLEGES

Mailing Address 601 13TH ST NW

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11.4602

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 100
	<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	

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 CHARLES SCHWAB CORPORATION PAC

Mailing Address 325 7TH STREET NW, SUITE 200

City WASHINGTON State DC Zip Code 20004-2827

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11.4762

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE TRAVELERS COMPANIES, INC. PAC

Mailing Address 1 TOWER SQUARE

City HARTFORD State CT Zip Code 06183-0001

FEC ID number of contributing federal political committee. **C C00376376**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11.4741

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH ST NW

City WASHINGTON State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11.4600

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).....

7000.00

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

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

FOR LINE NUMBER: PAGE 68 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
UNITED PARCEL SERVICE, INC. PAC

Mailing Address 55 GLENLAKE PARKWAY

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4455

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
US RICE PRODUCERS PAC

Mailing Address 2825 WILCREST DR SUITE 218

City HOUSTON State TX Zip Code 77042-3396

FEC ID number of contributing federal political committee. **C C00383661**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2016

Transaction ID : SA11.4436

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WL&J FEDERAL PAC, INC

Mailing Address 200 WEST CAPITOL AVENUE SUITE 2300

City LITTLE ROCK State AR Zip Code 72201-3615

FEC ID number of contributing federal political committee. **C C00600692**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11.4752

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

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

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

6000.00

107000.00

**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 69 OF 100
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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 WICKERS GROUP

Mailing Address 1819 POLK STREET
#373

City SAN FRANCISCO State CA Zip Code 94109

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
39200.07

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA14.1642

Amount of Each Receipt this Period
37184.68

Memo Item
REFUND OF OVER BUY FOR TELEVISION AD

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

37184.68

37184.68

**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 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ELIZABETH HARPER		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 1510 ALBERTA STREET		Amount of Each Disbursement this Period 13.06
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement REIMBURSEMENT - POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.I1600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELIZABETH HARPER		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1510 ALBERTA STREET		Amount of Each Disbursement this Period 1000.00
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.I1635
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELIZABETH HARPER		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1510 ALBERTA STREET		Amount of Each Disbursement this Period 1000.00
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.I1644
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2013.06
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 71 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ELIZABETH HARPER		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 1510 ALBERTA STREET		Amount of Each Disbursement this Period 1000.00
City LITTLE ROCK	State AR Zip Code 72227	
Purpose of Disbursement PAYROLL	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.I1648
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. ALLISON JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address PO BOX 7841		Amount of Each Disbursement this Period 4500.00
City LITTLE ROCK	State AR Zip Code 72217	
Purpose of Disbursement CONSULTING - FUNDRAISING	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.I1612
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. MR. JOHN T. O'ROURKE		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 11028 STANMORE DRIVE		Amount of Each Disbursement this Period 1000.00
City POTOMAC	State MD Zip Code 20854-1525	
Purpose of Disbursement IN-KIND CONTRIBUTION	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17.4640 IN KIND - FUNDRAISING - FOOD & BEVERAGE
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6500.00
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 72 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016		
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 234.98		
City LITTLE ROCK	State AR	Zip Code 72207	Memo Item <input type="checkbox"/>		
Purpose of Disbursement REIMBURSEMENT - OFFICE SUPPLIES		Category/ Type	Transaction ID : SB17.I1599		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) B. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 91.00		
City LITTLE ROCK	State AR	Zip Code 72207	Memo Item <input type="checkbox"/>		
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : SB17.I1603		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) C. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016		
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 2223.75		
City LITTLE ROCK	State AR	Zip Code 72207	Memo Item <input type="checkbox"/>		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I1636		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	2549.73
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 73 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 2610.00	
City LITTLE ROCK	State AR	Zip Code 72207	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17.I1643		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 64.35	
City LITTLE ROCK	State AR	Zip Code 72207	Memo Item <input type="checkbox"/>	
Purpose of Disbursement REIMBURSEMENT FUNDRAISING - FOOD/BEVERAGE		Category/ Type		
Candidate Name		Transaction ID : SB17.I1649		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ALEXANDER T ST AMOUR			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016	
Mailing Address 2200 RIVERFRONT DRIVE #4213			Amount of Each Disbursement this Period 2583.34	
City LITTLE ROCK	State AR	Zip Code 72202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17.I1584		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	5257.69
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ALEXANDER T ST AMOUR			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 2200 RIVERFRONT DRIVE #4213			Amount of Each Disbursement this Period 32.68	
City LITTLE ROCK	State AR	Zip Code 72202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement REIMBURSEMENT - POSTAGE		Category/ Type		
Candidate Name			Transaction ID : SB17.I1598	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ALEXANDER T ST AMOUR			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 2200 RIVERFRONT DRIVE #4213			Amount of Each Disbursement this Period 2583.34	
City LITTLE ROCK	State AR	Zip Code 72202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name			Transaction ID : SB17.I1622	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ALEXANDER T ST AMOUR			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 2200 RIVERFRONT DRIVE #4213			Amount of Each Disbursement this Period 2583.34	
City LITTLE ROCK	State AR	Zip Code 72202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name			Transaction ID : SB17.I1637	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5199.36
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 75 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ALEXANDER T ST AMOUR			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2200 RIVERFRONT DRIVE #4213			Amount of Each Disbursement this Period 2583.34	
City LITTLE ROCK	State AR	Zip Code 72202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name			Transaction ID : SB17.I1645	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ADVANCE PRINT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 4201 S. SHACKLEFORD SUITE C			Amount of Each Disbursement this Period 833.53	
City LITTLE ROCK	State AR	Zip Code 72204	Memo Item <input type="checkbox"/>	
Purpose of Disbursement LETTERHEAD		Category/ Type		
Candidate Name			Transaction ID : SB17.I1606	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016	
Mailing Address 208 SOUTH AKARD STREET			Amount of Each Disbursement this Period 40.90	
City DALLAS	State TX	Zip Code 75202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PHONE SERVICES		Category/ Type		
Candidate Name			Transaction ID : SB17.I1609	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3457.77
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 76 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement SOFTWARE	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1625
State: District:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement SOFTWARE	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1626
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITAL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 534.12
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEMBERSHIP DUES	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1587
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2130.12
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 77 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		Amount of Each Disbursement this Period 149.31
City PHILADELPHIA	State PA	
Zip Code 19103	Purpose of Disbursement INTERNET & CABLE SERVICES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1610
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DATAMAX		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 7400 KANIS RD		Amount of Each Disbursement this Period 15.15
City LITTLE ROCK	State AR	
Zip Code 72204	Purpose of Disbursement COPIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1611
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DELUXE BUSINESS SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 3680 VICTORIA STREET NORTH		Amount of Each Disbursement this Period 93.70
City SHOREVIEW	State MN	
Zip Code 55126-2966	Purpose of Disbursement OFFICE SUPPLIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1596
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	258.16
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 78 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. DIRECT MAIL SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 12450 AUTOMOBILE BOULEVARD		Amount of Each Disbursement this Period 2509.36
City CLEARWATER State FL Zip Code 33762	Purpose of Disbursement DIRECT MAIL SERVICES	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1630
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. IMPACT MANAGEMENT		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 124 WEST CAPITOL AVENUE SUITE 1886		Amount of Each Disbursement this Period 17374.44
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement DIRECT MAIL AND RESEARCH	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1602
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. IMPACT MANAGEMENT		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 124 WEST CAPITOL AVENUE SUITE 1886		Amount of Each Disbursement this Period 7348.50
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement DIRECT MAIL AND RESEARCH	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1607
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	27232.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. IMPACT MANAGEMENT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016
Mailing Address 124 WEST CAPITOL AVENUE SUITE 1886		Amount of Each Disbursement this Period 32627.47
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement DIRECT MAIL AND RESEARCH	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1618
State: District:		

Full Name (Last, First, Middle Initial) B. MCLARTY COMPANY		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 425 W CAPITOL AVE		Amount of Each Disbursement this Period 300.00
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement FUNDRAISING EVENT - RENTAL	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1608
State: District:		

Full Name (Last, First, Middle Initial) C. MITCHELL WILLIAMS LAW		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 425 WEST CAPITOL AVENUE		Amount of Each Disbursement this Period 1744.60
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement LEGAL SERVICES	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1614
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34672.07
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 80 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016							
Mailing Address 911 PANORAMA TRAIL SOUTH									
City ROCHESTER State NY Zip Code 14625		Amount of Each Disbursement this Period 293.88							
Purpose of Disbursement PAYROLL TAXES	Category/ Type	<input type="checkbox"/> Memo Item							
Candidate Name	Transaction ID : SB17.I1585								
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State: District:									

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016							
Mailing Address 911 PANORAMA TRAIL SOUTH									
City ROCHESTER State NY Zip Code 14625		Amount of Each Disbursement this Period 69.70							
Purpose of Disbursement PAYROLL PROCESSING FEES	Category/ Type	<input type="checkbox"/> Memo Item							
Candidate Name	Transaction ID : SB17.I1586								
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State: District:									

Full Name (Last, First, Middle Initial) C. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016							
Mailing Address 911 PANORAMA TRAIL SOUTH									
City ROCHESTER State NY Zip Code 14625		Amount of Each Disbursement this Period 69.70							
Purpose of Disbursement PAYROLL PROCESSING FEES	Category/ Type	<input type="checkbox"/> Memo Item							
Candidate Name	Transaction ID : SB17.I1595								
Office Sought: <table border="0"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<input type="checkbox"/>	House								
<input type="checkbox"/>	Senate								
<input type="checkbox"/>	President								
State: District:									

SUBTOTAL of Disbursements This Page (optional).....	433.28
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 81 OF 100	
	<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

A. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 69.70	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL PROCESSING FEES	<input type="checkbox"/> Memo Item Transaction ID : SB17.I1623	
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

B. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 584.34	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item Transaction ID : SB17.I1624	
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

C. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 569.96	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item Transaction ID : SB17.I1638	
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1224.00
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 82 OF 100	
	<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

A. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 67.09	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL PROCESSING FEES	<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.I1639	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

B. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 368.13	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.I1646	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

C. Full Name (Last, First, Middle Initial) PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 66.87	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL PROCESSING FEES	<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.I1647	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	502.09
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 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PEARTREE, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 52 EDGEHILL RD		Amount of Each Disbursement this Period 1595.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement MONTHLY RENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1613
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PEARTREE, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016
Mailing Address 52 EDGEHILL RD		Amount of Each Disbursement this Period 1595.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement MONTHLY RENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1619
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 1501 N. UNIVERSITY AVENUE		Amount of Each Disbursement this Period 404.88
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement MONTHLY RENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3594.88
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 84 OF 100			
	<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

A. PROSPECT BUILDING

Full Name (Last, First, Middle Initial)
Mailing Address 1501 N. UNIVERSITY AVENUE

City LITTLE ROCK State AR Zip Code 72207

Purpose of Disbursement MONTHLY RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 15 / 2016

Amount of Each Disbursement this Period: 414.80

Memo Item

Transaction ID : SB17.I1620

B. RAISE THE MONEY, INC.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 29 / 2016

Amount of Each Disbursement this Period: 981.70

Memo Item

Transaction ID : SB17.I1633

C. RAISE THE MONEY, INC.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2016

Amount of Each Disbursement this Period: 486.46

Memo Item

Transaction ID : SB17.I1634

SUBTOTAL of Disbursements This Page (optional) 1882.96

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 85 OF 100	
	<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

A. SALINE COUNTY GOP

Full Name (Last, First, Middle Initial)
Mailing Address 125 NORTH MARKET STREET

City BENTON State AR Zip Code 72015

Purpose of Disbursement
2016 LINCOLN DAY DINNER

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 17 / 2016

Amount of Each Disbursement this Period
250.00

Memo Item

Transaction ID : SB17.I1650

B. SECURITY BANKCARD

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 22116

City TULSA State OK Zip Code 74121

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ITEMS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 22 / 2016

Amount of Each Disbursement this Period
10110.51

Memo Item

Transaction ID : SB17.I1640
CREDIT CARD PAYMENT - SEE MEMO ITEMS

C. ACQUA AL 2

Full Name (Last, First, Middle Initial)
Mailing Address 212 7TH ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEALS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 22 / 2016

Amount of Each Disbursement this Period
28.10

Memo Item

Transaction ID : SB17.I1679
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

SUBTOTAL of Disbursements This Page (optional)..... 10360.51

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ACQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 212 7TH ST SE		Amount of Each Disbursement this Period 447.40
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1681 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 49.71
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement TELEPHONE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1666 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 65.39
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement TELEPHONE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1667 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 44.25
City DALLAS State TX Zip Code 75202	Purpose of Disbursement TELEPHONE	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1680 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. BEARNAISE		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 315 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 89.77
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEALS	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1671 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. CONGRESSIONAL INSTITUTE		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 1700 DIAGONAL RD #730		Amount of Each Disbursement this Period 853.00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement FUNDRAISING EVENT - RENTAL	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1668 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:	Category/Type	

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 88 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. DC TAXI		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 9.82
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement TRAVEL	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1670 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. DC TAXI		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 11.44
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement TRAVEL	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1673 ITEMIZED CREDIT CARD PAYMENT
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. DC TAXI		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 12.62
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement TRAVEL	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1675 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:	Category/Type	

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 89 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. DC TAXI

Mailing Address 1636 BLADENSBURG ROAD

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 11.98

Memo Item

Transaction ID : SB17.I1677
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

Full Name (Last, First, Middle Initial)
B. FRIENDS OF THE NRA

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement TICKETS TO EVENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 60.00

Memo Item

Transaction ID : SB17.I1674
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement INTERNET ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 27.57

Memo Item

Transaction ID : SB17.I1678
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

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 90 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MAILCHIMP		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 512 MEANS STREET, SUITE 404		Amount of Each Disbursement this Period 30.00
City ALTANTA	State GA Zip Code 30318	
Purpose of Disbursement INTERNET ADVERTISING	Category/Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1665 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 109.00
City LITTLE ROCK	State AR Zip Code 72202	
Purpose of Disbursement CAMPAIGN OFFICE FURNITURE	Category/Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1669 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) C. P C SIGNS		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 2534 COMMERCE BLVD		Amount of Each Disbursement this Period 8208.36
City CINCANNATI	State OH Zip Code 45241	
Purpose of Disbursement SIGNS	Category/Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1672 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. SIM'S BAR B QUE		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 1307 JOHN BARROW RD		Amount of Each Disbursement this Period 52.10
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1676
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 1839.22
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEMS	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1641
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENT - SEE MEMO ITEMS
State: District:		

Full Name (Last, First, Middle Initial) C. ACE HARDWARE		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address CANTRELL		Amount of Each Disbursement this Period 14.16
City LITTLE ROCK	State AR	
Zip Code 72223	Purpose of Disbursement FUNDRAISING SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.I1662
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1839.22
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 92 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. AMERICAN PIE PIZZA		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 10912 COLONEL GLENN ROAD SUITE 7000		Amount of Each Disbursement this Period 8.78
City LITTLE ROCK State AR Zip Code 72204	Purpose of Disbursement MEALS	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	Transaction ID : SB17.I1660 ITEMIZED CREDIT CARD PAYMENT 2/22/2016

Full Name (Last, First, Middle Initial) B. AMERICAN PIE PIZZA		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 10912 COLONEL GLENN ROAD SUITE 7000		Amount of Each Disbursement this Period 8.78
City LITTLE ROCK State AR Zip Code 72204	Purpose of Disbursement MEALS	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	Transaction ID : SB17.I1661 ITEMIZED CREDIT CARD PAYMENT 2/22/2016

Full Name (Last, First, Middle Initial) C. ARKANSAS BIG BUCK CLASSIC		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 8200 REMOUNT RD		Amount of Each Disbursement this Period 370.00
City NORTH LITTLE ROCK State AR Zip Code 72118	Purpose of Disbursement FUNDRAISING - TABLE AT EVENT	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	Transaction ID : SB17.I1657 ITEMIZED CREDIT CARD PAYMENT 2/22/2016

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 93 OF 100	
	<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

A. ARKANSAS REBAR

Full Name (Last, First, Middle Initial)
Mailing Address 1222 AIRLANE

City BENTON State AR Zip Code 72015

Purpose of Disbursement SIGNS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 1181.78

Memo Item

Transaction ID : SB17.I1651
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

B. FULLER & SON HARDWARE

Full Name (Last, First, Middle Initial)
Mailing Address 5915 R STREET

City LITTLE ROCK State AR Zip Code 72207

Purpose of Disbursement FUNDRAISING SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 32.68

Memo Item

Transaction ID : SB17.I1656
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

C. LOVE'S TRAVEL STOP

Full Name (Last, First, Middle Initial)
Mailing Address 11700 I-30

City LITTLE ROCK State AR Zip Code 72210

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2016

Amount of Each Disbursement this Period: 20.00

Memo Item

Transaction ID : SB17.I1655
ITEMIZED CREDIT CARD PAYMENT 2/22/2016

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 94 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT, INC.		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period \$ 17.43
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement FUNDRAISING SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1659 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. PAPA JOHN'S PIZZA		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 2000 S UNIVERSITY AVE		Amount of Each Disbursement this Period \$ 46.07
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1664 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) C. PILOT TRAVEL CENTER		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 7801 ALCOA ROAD		Amount of Each Disbursement this Period \$ 25.89
City BENTON	State AR	
Zip Code 72019	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1658 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. SHELL OIL		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 5801 R STREET		Amount of Each Disbursement this Period 40.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1663 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. THE HOME DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 12610 CHENAL PARKWAY		Amount of Each Disbursement this Period 35.33
City LITTLE ROCK	State AR	
Zip Code 72211	Purpose of Disbursement FUNDRAISING SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1654 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 8.32
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement FUNDRAISING SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1652 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 30.00
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement FUNDRAISING SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1653 ITEMIZED CREDIT CARD PAYMENT 2/22/2016
State: District:		

Full Name (Last, First, Middle Initial) B. SIMMONS FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 425 WEST CAPITOL		Amount of Each Disbursement this Period 77.75
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement BANK CHARGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1631
State: District:		

Full Name (Last, First, Middle Initial) C. SKYLITE SIGN & NEON INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 23106 CHICOT RD		Amount of Each Disbursement this Period 327.00
City EAST END	State AR	
Zip Code 72103	Purpose of Disbursement SIGNS	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1601
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	404.75
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 97 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		Amount of Each Disbursement this Period 5130.37
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement REIMBURSEMENT PAYMENT - SEE MEMO ITEMS	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1617
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITAL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 5130.37
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISNG EVENT RENTAL & CATERING	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1682 ITEMIZED REIMBURSEMENT PAYMENT 2/29/16
State: District:		

Full Name (Last, First, Middle Initial) C. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		Amount of Each Disbursement this Period 6068.36
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CONSULTING - FUNDRAISING	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1627 REIMBURSEMENT PAYMENT - SEE MEMO ITEMS
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11198.73
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 98 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CAPITAL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 6068.36
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING EVENT & CATERING	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1683 ITEMIZED PAYMENT 3/21/16
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		Amount of Each Disbursement this Period 2500.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CONSULTING - FUNDRAISING	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1628
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. TRIANGLE INSURANCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 4704 WEST COMMERCIAL DRIVE		Amount of Each Disbursement this Period 500.00
City NORTH LITTLE ROCK State AR Zip Code 72116	Purpose of Disbursement INSURANCE	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1629
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 99 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1201 WEST 6TH STREET			Amount of Each Disbursement this Period 250.00
City LITTLE ROCK	State AR	Zip Code 72201	
Purpose of Disbursement EVENT TICKETS		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1615
State: District:			

Full Name (Last, First, Middle Initial) B. REPUBLICAN PARTY OF ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1201 WEST 6TH STREET			Amount of Each Disbursement this Period 250.00
City LITTLE ROCK	State AR	Zip Code 72201	
Purpose of Disbursement EVENT TICKETS		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1616
State: District:			

Full Name (Last, First, Middle Initial) C. REPUBLICAN PARTY OF ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 1201 WEST 6TH STREET			Amount of Each Disbursement this Period 125.00
City LITTLE ROCK	State AR	Zip Code 72201	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I1632
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	124335.68

**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 100			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. DR. WHITFIELD KNAPPLE		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 4703 CRESTWOOD DR		Amount of Each Disbursement this Period 500.00
City LITTLE ROCK	State AR Zip Code 72207	
Purpose of Disbursement REFUND OF EXCESS CONTRIBUTION ON 03/14/16		<input type="checkbox"/> 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)	Transaction ID : SB20A.I1605
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		<input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		<input type="checkbox"/> 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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00