

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL ROOM

2002 FEB 11 P 12:49

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

00289728 121001 N 382  
JOHN LANGHAM  
GOLD CIRCLE-FEDERAL COMMITTEE  
602 GARRISON AVE STE 600  
FORT SMITH AR 72901

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00289728

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for this:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

\_\_\_\_/\_\_\_\_/\_\_\_\_

In the State of

\_\_\_\_

(d) 30-Day POST-Election Report for this:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

\_\_\_\_/\_\_\_\_/\_\_\_\_

In the State of

\_\_\_\_

5. Covering Period

07 01 2001

through

12 31 2001

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

JOHN C. LANGHAM

Signature of Treasurer

Date

01 14 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

Office Use Only

**FEC FORM 3X**  
(Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

GOLD CIRCLE - FEDERAL COMMITTEE

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2001"/>		<input type="text" value="509652"/>
(b) Cash on Hand at Beginning of Reporting Period .....	<input type="text" value="532630"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="000"/>	<input type="text" value="22978"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<input type="text" value="532630"/>	<input type="text" value="532630"/>
7. Total Disbursements (from Line 30) .....	<input type="text" value="500000"/>	<input type="text" value="500000"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<input type="text" value="32630"/>	<input type="text" value="32630"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="300000"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Revised 1/01)

Page 3

Write or Type Committee Name

GOLD CIRCLE - FEDERAL COMMITTEE

Report Covering the Period:

From:

07 01 2001

To:

12 31 2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	229.78
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	0.00	229.78
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....		
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	0.00	229.78
20. Total Federal Receipts (subtract Line 16 from Line 19) .....	0.00	229.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	1,000.00	1,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....	4,000.00	4,000.00
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....	5,000.00	5,000.00
31. Total Federal Disbursements (subtract Line 21(a)(R) from Line 30) .....	5,000.00	5,000.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3) .....		229.78
33. Total Contribution Refunds (from Line 28(d)) .....		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....	0.00	229.78
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
36. Offsets to Operating Expenditures (from Line 15, page 8) .....		
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....	0.00	0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE   OF		
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	
	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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)  
**GOLD CIRCLE - FEDERAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. JOHN BOOZMAN FOR CONGRESS</b>		Date of Disbursement <b>11 / 13 / 2001</b>
Mailing Address <b>3737 WALNUT STREET</b>		Amount of Each Disbursement This Period <b>1,000.00</b>
City <b>ROGERS</b>	State <b>AR</b>	
Purpose of Disbursement <b>CONTRIBUTION</b>		Category/Type <b>011</b>
Candidate Name <b>JOHN BOOZMAN</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>SPECIAL ELECTION</b>	
State: <b>AR</b>	District: <b>3AD</b>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State	
Purpose of Disbursement		Category/Type
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:	

SUBTOTAL of Disbursements This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	<b>1,000.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

21b  22  23  24  25  
 26  27  28a  28b  28c  29

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)

GOLD CIRCLE - FEDERAL COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

12 / 31 / 2001

A.

GOLD CIRCLE - STATE COMMITTEE #1

Mailing Address

602 GARRISON AVE, STE 600

City

State

Zip Code

FOOT SMITH

AR

72901

Purpose of Disbursement

REPAY DEBT

Candidate Name

009  
Category/  
Type

Amount of Each Disbursement this Period

2,000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

12 / 31 / 2001

B.

GOLD CIRCLE - STATE COMMITTEE #2

Mailing Address

602 GARRISON AVE, STE 600

City

State

Zip Code

FOOT SMITH

AR

72901

Purpose of Disbursement

REPAY DEBT

Candidate Name

009  
Category/  
Type

Amount of Each Disbursement this Period

2,000.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

   /    /   

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

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

4,000.00

**SCHEDULE D (FEC Form 3X)  
DEBTS AND OBLIGATIONS**  
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

GOLD CIRCLE - FEDERAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GOLD CIRCLE STATE COMMITTEE #1

Nature of Debt (Purpose):

TRANSFER

Mailing Address

602 GARRISON AVE, STE 600

City

State

Zip Code

FT. SMITH AR 72901

Outstanding Balance Beginning This Period

2000.00

Amount Incurred This Period

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GOLD CIRCLE STATE COMMITTEE #2

Nature of Debt (Purpose):

TRANSFER

Mailing Address

602 GARRISON AVE, STE 600

City

State

Zip Code

FT. SMITH AR 72901

Outstanding Balance Beginning This Period

2000.00

Amount Incurred This Period

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GOLD CIRCLE STATE COMMITTEE #3

Nature of Debt (Purpose):

TRANSFER

Mailing Address

602 GARRISON AVE, STE 600

City

State

Zip Code

FT. SMITH AR 72901

Outstanding Balance Beginning This Period

1000.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional) .....

2) TOTALS This Period (last page this line number only) .....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (in Full)

**GOLD CIRCLE - FEDERAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLD CIRCLE STATE COMMITTEE #4</b>		Nature of Debt (Purpose): <b>TRANSFER</b>
Mailing Address <b>602 GARRISON AVE, STE 600</b>		
City <b>FT. SMITH</b>	State <b>AR</b>	Zip Code <b>72901</b>
Outstanding Balance Beginning This Period <b>2,000.00</b>		Outstanding Balance at Close of This Period <b>2,000.00</b>
Amount Incurred This Period	Payment This Period	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Amount Incurred This Period	Payment This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code
Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period
Amount Incurred This Period	Payment This Period	

1) SUBTOTALS This Period This Page (optional) .....	
2) TOTALS This Period (last page this line number only) .....	<b>2,000.00</b>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<b>2,000.00</b>



Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 1-15-02
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>AM 12</i> PREPARER	<i>1-11-02</i> DATE PREPARED