

FEC  
FORM 3X

REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2018 DEC -7 AM 11:38  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ARKANSAS MEDICAL SOCIETY POLITICAL ACTION COM

ADDRESS (number and street)

PO BOX 55088



Check if different  
than previously  
reported. (ACC)

Little Rock

AR

72215

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00002907

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)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the  
State of

(d) 30-Day

POST-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the  
State of

5. Covering Period

10/01/2018

through

11/26/2018

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 Lydia Lane, MD. Designated Agent: H. Scott Smith

Signature of Treasurer

H. Scott Smith

Date

11/29/2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only

FEC FORM 3X  
Rev. 05/2016

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ARKANSAS Medical Society Political Action Committee

Report Covering the Period:

From:

10 01 2018

To:

11 26 2018

COLUMN A  
This Period

COLUMN B  
Calendar Year-to-Date

6. (a) Cash on Hand  
January 1,

2018

57,093.26

- (b) Cash on Hand at  
Beginning of Reporting Period.....

38,523.92

- (c) Total Receipts (from Line 19) .....

0.00

3,907.00

- (d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

38,523.92

61,000.26

7. Total Disbursements (from Line 31) .....

0.00

22,476.34

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

38,523.92

38,523.92

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



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 (Rev. 05/2016)

Page 3

Write or Type Committee Name

**ARKANSAS MEDICAL Society Political Action Committee**

Report Covering the Period:

From:

**10' 01' 2018**

To:

**11' 26' 2018**

**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).....▶

(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 33, page 5).....▶

**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 37, page 5).....

**16. Refunds of Contributions Made**

to Federal Candidates and Other

Political Committees.....

**17. Other Federal Receipts**

(Dividends, Interest, etc.).....

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),**

12, 13, 14, 15, 16, 17, and 18(c)).....▶

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19).....▶

- 0 -

0

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- 0 -
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- 0 -
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800.00
3,107.00
3,907.00

3,907.00

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3,907.00
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3,907.00
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CONFIDENTIAL - NOT FOR RELEASE

## Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated 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)) .....		- 0 -	8,476.34
22. Transfers to Affiliated/Other Party Committees .....		- 0 -	8,476.34
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		- 0 -	14,000.00
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....			
26. Loan Repayments Made .....			
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 (Including Non-Federal Donations) .....		- 0 -	
30. Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share .....			
(ii) "Levin" Share .....			
(b) Federal Election Activity Paid Entirely With Federal Funds .....			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		- 0 -	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		- 0 -	22,476.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....		- 0 -	22,476.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

**III. Net Contributions/  
Operating Expenditures**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

- 0 -
- 0 -
- 0 -
- 0 -
- 0 -
- 0 -

3907.00
- 0 -
3907.00
8476.34
- 0 -
8476.34

2018-12-10 12:07 PM

1-800-451-1000



ARKANSAS MEDICAL SOCIETY  
P.O. Box 55088  
Little Rock, Arkansas 72215

CERTIFIED MAIL



7012 2210 0000 9060 4617

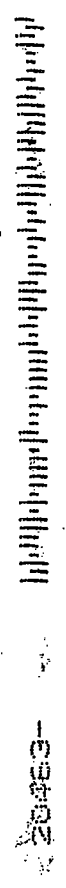


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2018 DEC -7 AM 11:38

FEC  
999 E Street NW  
Washington, DC 20463

RETURN RECEIPT  
REQUESTED



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

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 11-30-18
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	12-7-18 DATE PREPARED