# COWART FOR CONGRESS CAMPAIGN COMMITTEE

#### FASCIMILE TRANSMITTAL SHEET

| TO:                   |   | FROM:                        |
|-----------------------|---|------------------------------|
| FEC                   |   | LAUREN COFFMAN THOMAS        |
| FAX NUMBER:           |   | DATE:                        |
| 1-202-219-0174        |   | 5/16/12                      |
| COMPANY:              | : | TOTAL PAGES INCLUDING COVER: |
| FEC                   |   | 2                            |
| RE:                   |   |                              |
| <b>48 HOUR NOTICE</b> |   |                              |

To Whom It May Concern:

Attached please find a 48 Hour Notice (FEC Form 6) for Cowart for Congress, FEC ID # C00506451. Should you need any additional information, please do not hesitate to call me at 903-293-5770.

Respectfully,

LaurenCoffmenThomas

Lauren Coffman Thomas Treasurer

COWART FOR CONGRESS
LAUREN COFFMAN THOMAS - TREASURER
P. O. BOX 250 • GENOA, AR 71840-0250

### 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions) To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election. 1. NAME OF COMMITTEE IN FULL COWART FOR CONGRESS (feerle bna redmun) 889RDAA PO BOX 250 CITY, STATE, and ZIP CODE 71840-0250 AR GENDA 2. NAME OF CANDIDATE 4. FEC IDENTIFICATION NUMBER 3. OFFICE SOUGHT (State and District) JUHN COWART C00506451 AR 04 S. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING YES, IT AMENDS THE NOTICE FILED ON A. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer Date (month, Amount EDGAR CASON day, year) SELF-EMPLOYED 419 SHOP ROAD 05/16/12 2500.00 COUSHATTA, LA 71019 Occupation FARMER B. FULL NAME. MAILING ADDRESS AND ZIP CODE Date (month, **Amount** Name of Employer day, year) Occupation C. FULL NAME, MAILING ADDRESS AND ZIP CODE Date (month, Amount Name of Employer day, year) Occupation Date (month. Amount D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer day, yoar) Occupation Date (month, Amount E. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer day, year) Occupation SIGNATURE (optional) For further information contact: Federal Election Commission Lawren Coffman Thomas 5/16/12 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-894-1100

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FEC FORM 6
(Revised 07/2011)

FE1 AN053

# 12050811389

## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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| N/A<br>PREPARER   | N/A<br>DATE PREPARED |  |  |  |

(5/2004)