

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 Little Rock AR 72217 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00551275 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT 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 11 / 29 / 2016 through M M / D D / Y Y Y Y 12 / 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. Turner, Cale, , , Type or Print Name of Treasurer Signature of Treasurer Turner, Cale, , , [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 31 / 2017

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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))....	750.00	1350.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	750.00	1350.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	64392.98	78797.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64392.98	78797.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	648668.87	
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 05/2016)

Write or Type Committee Name

French Hill for Arkansas

Report Covering the Period: From: / 2016 To: / 2016

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).....	550.00	1150.00
(ii) Unitemized.....	200.00	200.00
(iii) TOTAL of contributions from individuals ▶	750.00	1350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	750.00	1350.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
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.)	0.00	0.00
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)..... ▶	750.00	1350.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64392.98	78797.88
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	0.00	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	64392.98	78797.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	712311.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	750.00
25. SUBTOTAL (add Line 23 and Line 24).....	713061.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	64392.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	648668.87

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

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

FOR LINE NUMBER: PAGE 5 OF 19
(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)
DICKINSON, THOMAS, , MR.,

Mailing Address 2115 NORTH SPRUCE STREET

City LITTLE ROCK State AR Zip Code 72207-4729

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

Name of Employer MCGEORGE CONTRACTING Occupation GENERAL MANAGER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2016

Transaction ID : SA11A.6263

Amount of Each Receipt this Period
 300.00

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JONES, JOHN, C., DR.,

Mailing Address 12 LONGFELLOW LANE

City LITTLE ROCK State AR Zip Code 72207-3750

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

Name of Employer SURGICAL CLINIC OF CENTRAL ARKANSAS Occupation PHYSICIAN

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2016

Transaction ID : SA11A.6264

Amount of Each Receipt this Period
 250.00

Memo Item CONTRIBUTION

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)..... ▶	550.00
TOTAL This Period (last page this line number only)..... ▶	550.00

**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 6 OF 19			
	<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. BENNETT, BROOKE, , MRS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016		
Mailing Address 4511 4TH STREET SOUTH			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22204	Amount of Each Disbursement this Period 259.06		
Purpose of Disbursement REIMBURSEMENT - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I2528		
Candidate Name			Memo Item SEE MEMO ITEMS		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. AVIS RENT-A-CAR			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 6 SYLVAN WAY			FEC Identification Number C		
City PARSIPPANY	State NJ	Zip Code 07054	Amount of Each Disbursement this Period 259.06		
Purpose of Disbursement TRAVEL - RENTAL CAR		Category/ Type	Transaction ID : SB17.I2529		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. GILDNER, LEIGH ANNA, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016		
Mailing Address 2800 CANTRELL ROAD			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 696.00		
Purpose of Disbursement CONTRACT LABOR - FIELD COORDINATION		Category/ Type	Transaction ID : SB17.I2526		
Candidate Name			Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	955.06
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 7 OF 19			
	<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. HARPER, ELIZABETH, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 1510 ALBERTA STREET			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72227	Amount of Each Disbursement this Period 1145.83		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I2479		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HARPER, ELIZABETH, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016		
Mailing Address 1510 ALBERTA STREET			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72227	Amount of Each Disbursement this Period 1145.83		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I2483		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. HARPER, ELIZABETH, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016		
Mailing Address 1510 ALBERTA STREET			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72227	Amount of Each Disbursement this Period 1145.83		
Purpose of Disbursement PAYROLL		Category/ Type	Transaction ID : SB17.I2487		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3437.49
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 8 OF 19
	<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. RICKELS, MISSY, , MRS.,		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 311 MCMILLEN TRAIL		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3165.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2480
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. RICKELS, MISSY, , MRS.,		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 311 MCMILLEN TRAIL		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72207
Purpose of Disbursement PAYROLL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1745.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2484
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 798.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2488
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5708.00
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 9 OF 19
	<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 11 / 29 / 2016
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 798.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2491
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement LUNCH MEETING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 116.18	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2519
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		FEC Identification Number C
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement INTERNET & CABLE SERVICES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 151.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I2521
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1065.68
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 10 OF 19			
	<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. DATAMAX			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016		
Mailing Address 7400 KANIS RD			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72204	Amount of Each Disbursement this Period 28.15		
Purpose of Disbursement COPIER RENTAL		Category/Type	Transaction ID : SB17.I2525		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. DIRECT MAIL SYSTEMS			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016		
Mailing Address 12450 AUTOMOBILE BOULEVARD			FEC Identification Number C		
City CLEARWATER	State FL	Zip Code 33762	Amount of Each Disbursement this Period 1264.97		
Purpose of Disbursement DIRECT MAIL SERVICES		Category/Type	Transaction ID : SB17.I2520		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. JAI LAMBERT			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016		
Mailing Address 9 CONNELL DRIVE			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72205	Amount of Each Disbursement this Period 950.00		
Purpose of Disbursement DESIGN SERVICES		Category/Type	Transaction ID : SB17.I2522		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2243.12
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 11 OF 19	
	<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. MOSES TUCKER REAL ESTATE INC			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016	
Mailing Address 200 RIVER MARKET AVE			FEC Identification Number C	
City LITTLE ROCK	State AR	Zip Code 72201	Amount of Each Disbursement this Period 1170.00	
Purpose of Disbursement MONTHLY RENT		Category/Type	Transaction ID : SB17.I2518	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. NATIONAL ASSOCIATION OF REALTORS			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016	
Mailing Address 500 NEW JERSEY AVE., NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement FUNDRAISING EVENT - VENUE RENTAL		Category/Type	Transaction ID : SB17.I2536	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
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 11 / 30 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14625	Amount of Each Disbursement this Period 69.51	
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/Type	Transaction ID : SB17.I2477	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1539.51
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 12 OF 19			
	<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 11 / 30 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			
City ROCHESTER	State NY	Zip Code 14625	
Purpose of Disbursement PAYROLL TAXES		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 329.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2478 <input type="checkbox"/> Memo Item		

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 12 / 30 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			
City ROCHESTER	State NY	Zip Code 14625	
Purpose of Disbursement PAYROLL PROCESSING FEE		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 69.51	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2481 <input type="checkbox"/> Memo Item		

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 12 / 30 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			
City ROCHESTER	State NY	Zip Code 14625	
Purpose of Disbursement PAYROLL TAXES		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 221.14	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2482 <input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	620.42
TOTAL This Period (last page this line number only).....▶	620.42

**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 13 OF 19	
	<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 12 / 15 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			
City ROCHESTER	State NY	Zip Code 14625	
Purpose of Disbursement PAYROLL PROCESSING FEE		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 69.51	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2485 <input type="checkbox"/> Memo Item		

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 12 / 15 / 2016	
Mailing Address 911 PANORAMA TRAIL SOUTH			
City ROCHESTER	State NY	Zip Code 14625	
Purpose of Disbursement PAYROLL TAXES		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 87.65	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2486 <input type="checkbox"/> Memo Item		

C. Full Name (Last, First, Middle Initial) PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016	
Mailing Address 1501 N. UNIVERSITY AVENUE			
City LITTLE ROCK	State AR	Zip Code 72207	
Purpose of Disbursement MONTHLY RENT		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period 406.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____	Transaction ID : SB17.I2530 <input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	563.33
TOTAL This Period (last page this line number only).....▶	563.33

**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 14 OF 19			
	<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. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 328.66		
Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/Type	Transaction ID : SB17.I2492		
Candidate Name			<input type="checkbox"/> Memo Item CREDIT CARD PAYMENT - SEE MEMO ITEMS		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 14.03		
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I2499		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. THE CAPITAL HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address 111 W MARKHAM			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 50.74		
Purpose of Disbursement LUNCH MEETING		Category/Type	Transaction ID : SB17.I2496		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	328.66
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 15 OF 19			
	<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. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 3125.79		
Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEMS		Category/Type	Transaction ID : SB17.I2501		
Candidate Name			Memo Item CREDIT CARD PAYMENT - SEE MEMO ITEMS		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. EMBASSY SUITES			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 900 10TH STREET NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 234.25		
Purpose of Disbursement EVENT - VENUE RENTAL		Category/Type	Transaction ID : SB17.I2510		
Candidate Name			Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PIZZA CAFE			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2016		
Mailing Address 1517 REBSAMEN PARK RD			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 203.43		
Purpose of Disbursement VOLUNTEER EVENT - CATERING		Category/Type	Transaction ID : SB17.I2505		
Candidate Name			Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3125.79
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 16 OF 19			
	<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. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address P.O. BOX 22116			FEC Identification Number C		
City TULSA	State OK	Zip Code 74121	Amount of Each Disbursement this Period 12.25		
Purpose of Disbursement BANK FEE		Category/Type	Transaction ID : SB17.I2515		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. US POST OFFICE			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 600 E CAPITOL AVE			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72202	Amount of Each Disbursement this Period 2115.00		
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : SB17.I2513		
Candidate Name			<input checked="" type="checkbox"/> Memo Item ITEMIZED CREDIT CARD PAYMENT 12/12/2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. THE OORBEEK GROUP			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016		
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/Type	Transaction ID : SB17.I2531		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
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 17 OF 19			
	<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 12 / 12 / 2016		
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016					
City WASHINGTON		State DC	Zip Code 20003		
Purpose of Disbursement CONSULTING - FUNDRAISING COMMISSION			FEC Identification Number C		
Candidate Name			Amount of Each Disbursement this Period 20772.00		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		Transaction ID : SB17.I2533 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. THE OORBEEK GROUP			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016					
City WASHINGTON		State DC	Zip Code 20003		
Purpose of Disbursement REIMBURSEMENT - SEE MEMO ITEM			FEC Identification Number C		
Candidate Name			Amount of Each Disbursement this Period 7015.29		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		Transaction ID : SB17.I2534 <input type="checkbox"/> Memo Item SEE MEMO ITEM			

Full Name (Last, First, Middle Initial) C. FIRESTONE COUNTRY CLUB			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 452 E WARNER RD					
City AKRON		State OH	Zip Code 44319		
Purpose of Disbursement FUNDRAISING EVENT - VENUE RENTAL			FEC Identification Number C		
Candidate Name			Amount of Each Disbursement this Period 7015.29		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		Transaction ID : SB17.I2537 <input checked="" type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	27787.29
TOTAL This Period (last page this line number only).....▶	27787.29

**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 18 OF 19	
	<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 12 / 12 / 2016
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONSULTING - FUNDRAISING		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.I2538
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONSULTING - FUNDRAISING		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.I2539
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. THOMAS & THOMAS, LLP		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016
Mailing Address 201 E. MARKHAM STREET, SUITE 500		FEC Identification Number C
City LITTLE ROCK	State AR	Zip Code 72201
Purpose of Disbursement ACCOUNTING & COMPLIANCE		Amount of Each Disbursement this Period 4000.00
Candidate Name		Transaction ID : SB17.I2524
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	9000.00
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 19 OF 19			
	<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. TROOP 30			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address 2223 DERWOOD ROAD			FEC Identification Number C		
City LITTLE ROCK	State AR	Zip Code 72207	Amount of Each Disbursement this Period 5178.38		
Purpose of Disbursement PURCHASE OF CHRISTMAS CARDS		Category/Type	Transaction ID : SB17.I2532		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>		
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) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>		
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).....▶	5178.38
TOTAL This Period (last page this line number only).....▶	64052.73