RECEIVED
FEC MAIL ROOM

REPORT OF RECEIPTS AND DISBURSEMENTS

2001 JUL -2 A 11:51

For Other than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
Democratic Party of Arkansas - Federal Account

ADDRESS (number and street) ☐ Check if different than previously reported.
1300 West Capitol

CITY, STATE and ZIP CODE
Little Rock, AR 72201

2. FEC IDENTIFICATION NUMBER
C00024372

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☒ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid-Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election on
_____ in the State of _____

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period 04/01/98 through 06/30/98		
6. (a) Cash on Hand January 1, 19 98		$26372.91
(b) Cash on Hand at Beginning of Reporting Period	$28426.90	
(c) Total Receipts (from Line 18)	$108998.72	$395548.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$137425.62	$421920.92
7. Total Disbursements (from Line 30)	$128659.06	$413154.26
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$8766.56	$8766.56
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)		

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Ron L. Oliver

Signature of Treasurer
Ron L. Oliver

Date

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

FEC FORM 3X
(Revised 6/93)

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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)

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joe Bennett P.O. Box 969 Harrison, AR 72602- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Physician Aggregate Year-to-Date -> $340.00	04/13/98	$85.00
Joe Bennett P.O. Box 969 Harrison, AR 72602- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Physician Aggregate Year-to-Date -> $425.00	05/13/98	$85.00
Marion Berry P.O. Box 6084 Jonesboro, AR 72401- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: U.S. Government Occupation: Congressman Aggregate Year-to-Date -> $5000.00	04/02/98	$5000.00
Robert Carver 1000 Hwy 71 North Mena, AR 71953- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Carver Motors Occupation: Owner Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
Anthony Critelli 30 Billingsley Dr Bella Vista, AR 72714- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Morning News of NW Ark. requested Occupation: Columnist Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
Bobby Glover P.O. Box 1 Carlisle, AR 72024- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Self Employed Occupation: Businessman Agency Glover Insurance Aggregate Year-to-Date -> $340.00	04/13/98	$85.00
Bobby Glover P.O. Box 1 Carlisle, AR 72024- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Self Employed Occupation: Businessman Agency Glover Insurance Aggregate Year-to-Date -> $425.00	05/13/98	$85.00

SUBTOTAL of Receipts This Page (optional)	$7340.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Steven D. Gunderson PO Box 1000 Fayetteville, AR 72702- Receipt For: [ ] Primary [X] General [ ] Other (specify)	McAlister & Wade Attorney Aggregate Year-to-Date -> $1400.00	04/02/98	$1400.00
Randy Laverty P.O. Box 303 Jasper, AR 72641- Receipt For: [ ] Primary [X] General [ ] Other (specify)	state of Arkansas legislator Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
Alfred Martin PO Box 107 Benton, AR 72018- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Employed Real Estate Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
Robert N. Murphy PO Box 969 Cherokee Village, AR 72525- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Cherokee Frame Co., Requested Owner Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
James W. Stanley 564 Skyline Dr North Little Rock, AR 72116- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Stanley Law Firm Attorney Aggregate Year-to-Date -> $1000.00	04/02/98	$1000.00
Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	/ /	
Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	/ /	

SUBTOTAL of Receipts This Page (optional)	$5400.00
TOTAL This Period (last page this line number only)	$12740.00

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.

☑	Hand Delivered	Date of Receipt 7/2/01
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JAQ — PREPARER

7/2/01 — DATE PREPARED

(6/2000)