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FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

				Cinico	USE-CINY IL TY L. I (
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typ over the lines.	ing, type	12FE4M5	
Arkanisias M	reidicicia II Soic	neity P	olitic	al Acti	OW COM
		<u> </u>			
ADDRESS (number and street)	190 Bx 550	<u> </u>	<u> </u>	· 	
Check if different		<u> </u>	<u></u>	· 	
than previously reported. (ACC)	Li++1e Re	PICK IIII	ا لبي	AR 17.2	2,15]-
2. FEC IDENTIFICATION I	NUMBER ▼ CI	ΓΥ ▲	s	TATE ▲	ZIP CODE ▲
C1000029	カブ 類 3. 1	· 1V5	NEW (N) OR	AMENDE (A)	D
4. TYPE OF REPORT (Choose One)	Report 6	20 (M2)	May 20 (M5)	Aug 20 (M	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Ma	r 20 (M3)	Jun 20 (M6)	Sep 20 (M	Dec 20 (M12)
	Арг	20 (M4)	Jul 20 (M7)	Oct 20 (M1	Year Only) • 0) 4 Jan 31 (YE)
April 15 Quarterly Report	(Q1) (c) 12-Day	Primary (12	P)	General (12G)	Runoff (12R)
July 15 Quarterly Report ((Q2)	Erang.	y many		laced and the second
October 15 Quarterly Report	Report for the:	Convention	(120)	Special (12S)	
January 31 Year-End Report (_	on on			in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POST-Election	General (30	G)	Runoff (30R)	Special (30S)
Termination Report	Report for the:		F6" F6" F7		in the
asse (TETY)	Election	on on		range manger and	State of
5. Covering Period	7 01 20	through	09	30 2	OIJ
I certify that I have examined t	this Report and to the best of	my knowledge and	belief it is true	e, correct and comp	olete.
Type or Print Name of Treasur	er Lyda F. Lane	2, MD, D	<u>e signate</u>	ed Agent	H. Soft Juith
Signature of Treasurer	I Scoth	Smith	Da	ite [O	105 101
NOTE: Submingion of false	noone or läänmalate information			Daniel III III	-W of 0 11 C 0 140=
NOTE: Submission of false, error	neous, or incomplete informatio	in inay subject the per	son signing this		
Use Only				, F	C FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name ARKANSAS MEDICAL SOCIETY Political Report Covering the Period: From: 07 01 2014	Action Counitlee
	، - مُنْسَمِّعُونُونَ / مُنْسَلِّمُونُونُ / مُنْسَلِّمُونُونُونُونُونُونُونُونُونُونُونُونُونُ
Report Covering the Period: From: 07 01 2014	a mamay and on a varante
Programments and the programment of the programment	To: 09 30 2019
	CETA GEORGES CO CONTRACTOR NECESCRICA AND CHARGES I AND CHARGE I AND CHARGES I AND CHA
COLUMN A	COLUMN B
This Period	Calendar Year-to-Date
6. (a) Cash on Hand	the contractions to produce the second se
January 1, 2014	862448
(b) Cash on Hand at	
Beginning of Reporting Period	80
(c) Total Receipts (from Line 19)	00 187109
	de meliones de la constantina del constantina del constantina de la constantina de la constantina del constantina
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines	
6(a) and 6(c) for Column B)	80 104,955,8
. Total Disbursements (from Line 31)	64 763664
Cash on Hand at Close of Reporting Period	
(subtract Line 7 from Line 6(d))	16 973191
The and Orlinian Could TO	
Debts and Obligations Owed TO the Committee (Itemize all on	No.
Schedule C and/or Schedule D)	The state of the
Debts and Obligations Owed BY	
the Committee (Itemize all on	- Grand
Schedule C and/or Schedule D)	and the same of th
Ç ez zağı	
This committee has qualified as a multicandidate committee. (see FEC FORM	1 1M)
	A Company of the Comp

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

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111-10		SILINADADEA	
<i></i>	~	SUMMARY	

	DETAILED SUIVINANT PAGE	•
FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		0 "
Arkansas Medical	Society Political Action	n Committee
Report Covering the Period: From:	0.7 01 2014	To: D9 30 2014
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	1150.00	7.1.50,00
(i) Itemized (use Schedule A)	······································	
(ii) Unitemized	254500	1154700
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	369500	[ \$ 69700
, circo i (ci/ti) and (ii)		
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Сату		
Totals to Line 33, page 5)	369500	1869.700
12. Transfers From Affiliated/Other		
Party Committees	And the state of t	
13. All Loans Received		The state of the second se
14. Loan Repayments Received		
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made		or with the state of the state of
to Federal Candidates and Other	-31.5 mg	
Political Committees		And Complete Control of the Control
17. Other Federal Receipts		
(Dividends, Interest, etc.)		1392
18. Transfers from Non-Federal and Levin I	Funds	क्षा १८ के के के किया है जिस्सी के किय जिस्सी के किया किया किया किया किया किया किया किया
(a) Non-Federal Account		
(from Schedule H3)	The latest the same of the sam	
	The state of the s	
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b)		The plants of sources and the source of the
Marie Carles Control Section of the		ুটি হেন্দ্রট উওটে) ক্লেড্রন্ড্রেম্মের্ক্র্রি ক্রেটি । ত
19. Total Receipts (add Lines 11(d),	e e e e e e e e e e e e e e e e e e e	and the second s
12, 13, 14, 15, 16, 17, and 18(c))	369500	1871192
12, 10, 14, 13, 10, 17, and 10(0)/	1.0.0.7.0	Line Line Line
20. Total Federal Receipts		Proming the second seco
(subtract Line 18(c) from Line 19)	369500	1871092
	Land and the second a	

# **DETAILED SUMMARY PAGE** of Disbursements

_	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)		And the state of t
	(i) Federal Share		
•			
•	(ii) Non-Federal Share		
	(b) Other Federal Operating	13664	13/64
	Expenditures(c) Total Operating Expenditures	1.7.6.	
	(add 21(a)(i), (a)(ii), and (b))	13664	121064
22.	Transfers to Affiliated/Other Party		
•	Committees	500000	50000
23.	Contributions to		
· - ·	Federal Candidates/Committees and Other Political Committees	50.0.00	250000
24.	Independent Expenditures		
25.	(use Schedule E)		
	(use ochedule i )		
26.	Loan Repayments Made		
	Loans Made		
28.	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	563664	7,636,94
-30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
	(ii) "Levin" Share		
. ·	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
Jen. Line	(c) Total Federal Election Activity (add "		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
	The second of th		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	563664	7.63694
<b>32</b> .	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)▶	563664	763694

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	369500	1.8,69709
34. Total Contribution Refunds (from Line 28(d))	-0-	7.5-9-5
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,695.00	1869700
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	13664	136.64
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13664	1.36.64

SCHEDULE A. (FEC Form 3X)	** [1, 27 2 ] 2 ] [1	FOR LINE NUMBER: PAGE 1, OF 2
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	11a   11b   11c   12   13   14   15   16   17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Arkanoas Medical Society	Political Action (	onnitlee
Full Name (Last, First, Middle Initial)  A. Bauker, Jeffrey		Date of Receipt
Mailing Address 10 River Oaks Cu		09 29 2014
City Little ROCK AR State	Zip Code 7220 7	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300.9
Name of Employer Ark Otologyngology Occup	physician	
	gate Year-to-Date ▼	
Other (specify) ▼	4000	
Full Name (Last, First, Middle Initial)  B. Dun nagan Steven		Date of Receipt
Mailing Address 150 Hickory Creek C		07/23/2014
City Little Rock AR	Zip Code 72212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25000
Name of Employer Cocupa	ation Ohysician	
Pagaint Far	gate Year-to-Date ♥	
Other (specify) ▼	A. A 250°	
Full Name (Last, First, Middle Initial)  C. Lauton, Ann Dee		Date of Receipt
Mailing Address   1401 Braden St		77 24 2014
City Jacksonville Al	Zip Code 72076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300 0
	hystcian	
Receipt For:  Primary General  Other (specify) ▼	Jate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		850 04
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 2 OF2
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and	may not be sold or used by any p address of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		^
Arkansas Medical Societ	y Political Act	in Comitee
Full Name (Last, First, Middle Initial)  A. Lowery Robert D  Mailing Address		Date of Receipt
Mailing Address D5 Central Ave		07/22/2014
City # Searcy AR	Zip Code 72143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300.00
ACCUSATION OF THE PROPERTY OF		Discreption and indicate Adjusted Discreption and Asjusted Consider Discreption (Consider Discreption Consider Dis
	hýšican	
Receipt For:  Aggregat  Primary  General	e Year-to-Date ▼	· ·
Other (specify)		
Full Name (Last, First, Middle Initial)		7.11
B. Mailing Address	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
	- · · · · · · · · · · · · · · · · · · ·	
City State	Zip Code	Amount of Each Receipt this Period
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federal political committee.	nachomilaculos estanchas decen	handanian/Dankaniban/Dankaniban/Dankanib
Name of Employer Occupation	on :	
	e Year-to-Date ▼	
Primary General Other (specify) ▼	A A A	
Secondarios Company	one (), be a discourt would be and one of the orbits and one	3.2
Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address	· · · · · · · · · · · · · · · · · · ·	
City State	Zip Code	handracei kanostował kenelenadanci aczl
FFO ID work and a state of the	manufactura Angera Barana Angera Angera	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	marken ekonologia konologia	
Name of Employer Occupation	uċ	
	e Year-to-Date ▼	
Primary General Other (specify) ▼	<u>างรุ่งสินการที่สามาร์ของสามาร์ของสร้างสาทาร์ของวิธีของส</u>	1
	AN A W AN W A AN A	教 し

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

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

SCHEDULE B (FEC Form 3X)		FOR LINE NUM	IBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one	<u> </u>
4	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	ents may not be sold or used		
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)		14	A
V ·	ty to litical	Actio	1 Committee
Full Name (Last, First, Middle Initial)  A.	c	ם	ate of Disbursement
HAKANSAS Mailing	Services		09 72 70 1
Mailing Address City  QUD71	tate Zip Code		
	7219	0	
Mailing   postage		<u> </u>	mount of Each Disbursement this Period
Candidate Name	1 1000	Category/ Type	136.64
Office Sought: House Disbursem			
	Primary General  Other (specify) ▼		
State: District:			The state of the s
Full Name (Last, First, Middle Initial)			
<b>B.</b> .		D	ate of Disbursement
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		A	mount of Each Disbursement this Period
Candidate Name	C	ategory/ Type	
Office Sought: House Disburseme			
	Primary General Other (specify) ▼		
State: District			·
Full Name (Last, First, Middle Initial)			
<b>C</b> .		Da	ate of Disbursement
Mailing Address			, , , , , , , , , , , , , , , , , , , ,
City	ate Zip Code		<del></del>
Purpose of Disbursement	l.		nount of Each Disbursement this Period
Candidate Name		Secretary 1	nount of Each Disbursement this Pendo
Office Sought:   House   Disburseme	ent For:	- ype	
. 🗀 1 🗀	rimary General		
President C	Other (specify)		•
	<del></del>		
SUBTOTAL of Disbursements This Page (optional)		<b>_</b>	
TOTAL This Period (last page this line number only)			

## SCHEDULE B (FEC Form 3X) PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b **7** 22 23 24 25 26 **Detailed Summary Page** 27 28a 28c 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) Date of Disbursement Zip Code 12215 State 0 Amount of Each Disbursement this Period Candidate Name Category/ nla Type Office Sought: House Disbursement For: Senate **Primary** General President Other (spepify) State: District: Full Name (Last, First, Middle Initial) B. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District Full Name (Last, First, Middle Initial) **Date of Disbursement** Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate **Primary** General President Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional).....

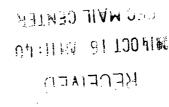
TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
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or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)		. 1	
Arkansas Medical Socie	ty to litical	Act	ior Committee
Full Name (Last, First, Middle Initial)	• •		Date of Disbursement
Democratic Huting A	r Kaniscis		MEN / DED / VEVEN P
Mailing Address W Capital Ave			08 20 2014
City Little Rock A	tate Zip Code 7220	(	
Purpose of Disbursement			·
Jefferson - Gackson Candidate Name	Dinner	0,1,1	Amount of Each Disbursement this Period
Candidate Name	1	Category/ Type	500.00
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$\Lambda IIR$	Primary General	j	
State: District:	Other (specify)   Dinn	er	•
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<b>B.</b> .		į	Date of Disbursement
Mailing Address	<del></del>		H H / D J / Y Y Y Y Y
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City	tate Zip Code		
Purpose of Disbursement	· · · · · · · · · · · · · · · · · · ·		
			Amount of Each Disbursement this Period
Candidate Name	70	Category/	
Office Sought:   House   Disbursem	ent For:	Туре	
<b>├</b> ─-	Primary General		
State: District C	Other (specify)	)	
Full Name (Last, First, Middle Initial)		<del></del>	
C			Date of Disbursement
Mailing Address			, B 4 B , V 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
wanny Address			
City St	ate Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name	C	ategory/	
Office Sought: House Disburseme	ent For:	Туре	
Senate P	rimary General		
President C State: District:	Other (specify)	.	·
Outc. District.			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	
TOTAL This Period (last page this line number only)	•••••	<b>&gt;</b>	

0000818034 OCT 10 2014 MAILED FROM ZIP CODE 72205



Federal Election Commission Washington, DC 20463 999 E Street NW





P.O. Box 55088

ARKANSAS MEDIC

Little Rock, Arkansas 72215-

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busi	ness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	of Receipt or Postmarked
PREPARER	/0/16/14 DATÉ PREPARED
(8/2013)	