REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR

NAME OF COMMITTEE (Name)

[illegible]

C00230920

2. FEC IDENTIFICATION NUMBER

3. This committee [illegible] committee DURING THIS Reporting Period [illegible] (date)

4. TYPE OF REPORT

[illegible] Report

[illegible] Quarterly Report

[illegible] Quarterly Report

X [illegible] Report

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

(a) Is this Report an Amendment? Yes X No

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

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5	Covering Period 7-1-93 through 12-31-93		
6	(a) Cash on Hand January 1, 1993		$ 675.00
	(b) Cash on Hand at Beginning of Reporting Period	$ 900.00	
	(c) Total Receipts (from Line 19)	$ 0	$ 225.00
	(d) Subtotal (add Lines 6(a) and 6(b) for Column A and Lines 6(a) and 6(b) for Column B)	$ 0	$ 900.00
7	Total Disbursements (from Line 30)	$ 250.00	$ 250.00
8	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 650.00	$ 650.00
9	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
555 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202 376 3120

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

ANDREW HELTON

Signature of Treasurer

Date 1/14/94

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

FEC FORM 3X

(revised 1/1/91)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 7-1-93 TO: 12-31-93

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11	Contributions (other than loans) From:		
	a. Individual/Persons Other Than Political Committees		
	i. Itemized (use Schedule A)	0	225.00
	ii. Unitemized	0	0
	iii. Total (add i and ii) ➤	0	225.00
	b. Political Party Committees	0	0
	c. Other Political Committees (such as PACs)	0	0
	d. Total Contributions (add a iii, b and c) ➤	0	225.00
12	Transfers From Affiliated/Other Party Committees	0	0
13	All Loans Received	0	0
14	Loan Repayments Received	0	0
15	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17	Other Federal Receipts (Dividends, Interest, etc.)	0	0
18	Transfers from Nonfederal Account for Joint Activity	0	0
19	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	0	225.00
20	Total Federal Receipts (subtract line 18 from line 19) ➤	0	225.00
	II. Disbursements		
21	Operating Expenditures:		
	a. Shared Federal/Non-Federal Activity (from Schedule H4)		
	i. Federal Share	0	0
	ii. Non-Federal Share	0	0
	b. Other Federal Operating Expenditures	0	0
	c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0
22	Transfers to Affiliated/Other Party Committees	0	0
23	Contributions to Federal Candidates/Committees and Other Political Committees	250.00	250.00
24	Independent Expenditures (use Schedule E)	0	0
25	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)); (use Schedule F)	0	0
26	Loan Repayments Made	0	0
27	Loans Made	0	0
28	Refunds of Contributions To:		
	a. Individuals/Persons Other Than Political Committees	0	0
	b. Political Party Committees	0	0
	c. Other Political Committees (such as PACs)	0	0
	d. Total Contribution Refunds (add a, b and c) ➤	0	0
29	Other Disbursements	0	0
30	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	250.00	250.00
31	Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	250.00	250.00
	III. Net Contributions/Operating Expenditures		
32	Total Contributions (other than loans)(from line 11d)	0	0
33	Total Contribution Refunds (from line 28d)	0	0
34	Net Contributions (other than loans)(subtract line 33 from 32)	0	0
35	Total Federal Operating Expenditures (add 21 a and 21 b) ➤	0	0
36	Offsets to Operating Expenditures (from line 15)	0	0
37	Net Operating Expenditures (subtract line 36 from 35) ➤	0	0

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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)

ARKANSAS ASSOCIATION OF BANK HOLDING COMPANIES PAC INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Senator Jim Sasser 363 Russell Office Building Washington, D.C. 20510	Disbursement for: ☐ Primary ☐ General ☐ Other (specify) Fundraiser	9-9-93	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 250.00

TOTAL This Period (last page this line number only) 250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARKANSAS ASSOCIATION OF BANK HOLDING COMPANIES PAC INC.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jack Avery 700 Calvin Avery Dr. West Memphis, AR 72303 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity Nat'l Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Trent P. Pierce 916 W. Barton West Memphis, AR 72301 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ralph C. Carlson Rt. 1, Box 568 Marion, AR 72364 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jim Pugh Oaktree Farm Proctor, AR 72376 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Donald B. Weis Box 1985 West Memphis, AR 72303 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William Carlson Route 1, Box 566 Marion, AR 72364 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
W. J. Carlson Route 1, Box 570 Marion, AR 72364 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Fidelity National Bank Occupation: Bank Executive Aggregate Year-to-Date > $ 25.00	2/25/93	$25.00

SUBTOTAL of Receipts This Page (optional) > ~~$175.00~~

TOTAL This Period (last page only, this line number only) > $225.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARKANSAS ASSOCIATION OF BANK HOLDING COMPANIES PAC INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. P. Michael Murphy 900 Oakdale West Memphis, AR 72301 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Fidelity National BaNK Occupation: Bank Executive Aggregate Year-to-Date > $ 50.00	2/25/93	$50.00
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) . . . . . > ~~$50.00~~

TOTAL This Period (last page this line number only) . . . . . > $225.00

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
☒	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	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

PREPARER

DATE PREPARED

FEC FORM 70-2 (12/92)