

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

Check if different than previously reported. (ACC)

Little Rock

AR

72217

2. FEC IDENTIFICATION NUMBER ▼

C C00551275

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

AR

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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 Cale Turner

Signature of Treasurer Cale Turner

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

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))....	212178.54	2140895.06
(b) Total Contribution Refunds (from Line 20(d))	500.00	2800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	211678.54	2138095.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	191684.36	2041980.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	46750.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	191684.36	1995230.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	117864.14	
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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name
French Hill for Arkansas

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election) through 11 / 24 / 2014 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
101956.18	1621913.03	1100.00
(ii) Unitemized		
8020.00	68529.67	
(iii) Total of contributions from individuals		
109976.18	1690442.70	1100.00
(b) Political Party Committees		
0.00	8800.00	
(c) Other Political Committees		
102202.36	441652.36	2500.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 122

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
212178.54	2140895.06	3600.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	6250.62	
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	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	46750.00	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
212178.54	2193895.68	3600.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 122

Write or Type Committee Name

French Hill for Arkansas

 Report Covering the Period: From: / / To: / /
II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="191684.36"/>	<input type="text" value="2041980.75"/>	<input type="text" value="34850.79"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="300.00"/>	<input type="text"/>
(b) Political Party Committees		
<input type="text" value="500.00"/>	<input type="text" value="500.00"/>	<input type="text"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 122

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	2000.00	
------	---------	--

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

500.00	2800.00	0.00
--------	---------	------

21. OTHER DISBURSEMENTS

0.00	0.00	
------	------	--

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

192184.36	2044780.75	34850.79
-----------	------------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

211678.54	2138095.06	3600.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

191684.36	1995230.75	
-----------	------------	--

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	97869.96
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	212178.54
25. SUBTOTAL (add Line 23 and Line 24).....	310048.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	192184.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	117864.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
DR. AL ALEXANDER

Mailing Address **3612 FOXCROFT ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72227-2333**

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

Name of Employer **RADIOLOGY ASSOCIATES, P.A.** Occupation **RADIOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3168

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KAY KELLEY ARNOLD

Mailing Address **3901 CEDAR HILL ROAD #5**

City **LITTLE ROCK** State **AR** Zip Code **72202-1948**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2917

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HUNTER BABIN

Mailing Address **5610 HAWTHORNE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4308**

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

Name of Employer **ONE ACCESS** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3063

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. CINDY B. BALDERACH

Mailing Address 12415 COBBLESTONE DRIVE

City HOUSTON State TX Zip Code 77024-4904

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

Name of Employer SPRING BRANCH, I.S.D. Occupation EDUCATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3177

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ERNST S. BAUER

Mailing Address 211 9TH AVEUNUE

City SAN FRANCISCO State CA Zip Code 94118-2208

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

Name of Employer THE SALVATION ARMY Occupation DIRECTOR OF DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2957

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD BEARDEN

Mailing Address 124 WEST CAPITOL AVENUE
SUITE 1886

City LITTLE ROCK State AR Zip Code 72201-3756

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

Name of Employer IMPACT MANAGEMENT GROUP, INC. Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3039

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
COLONEL JOSEPH C. BECK

Mailing Address 453 VALLEY CLUB CIRCLE

City: LITTLE ROCK State: AR Zip Code: 72212-3461

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 605.00

Date of Receipt: 10 / 20 / 2014

Transaction ID : SA11.3038

Amount of Each Receipt this Period: 10.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COLONEL JOSEPH C. BECK

Mailing Address 453 VALLEY CLUB CIRCLE

City: LITTLE ROCK State: AR Zip Code: 72212-3461

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 605.00

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11.3228

Amount of Each Receipt this Period: 10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. CHRIS BENNETT

Mailing Address 2702 STONEHEDGE

City: HARRISON State: AR Zip Code: 72601-8617

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: RADIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 21 / 2014

Transaction ID : SA11.3072

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

270.00

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

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

FOR LINE NUMBER: PAGE 10 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. MARIE SHARPE BLAINE

Mailing Address 154 GLYNN WAY DRIVE

City HOUSTON State TX Zip Code 77056-1112

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2894

Amount of Each Receipt this Period
 _____ 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD BLANK JR.

Mailing Address 5618 EDGEWOOD ROAD

City LITTLE ROCK State AR Zip Code 72207-5314

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

Name of Employer STEPHENS, INC. Occupation MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2903

Amount of Each Receipt this Period
 _____ 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KRISTINA BOLHOUSE

Mailing Address 10 NORTHWEST COURT

City LITTLE ROCK State AR Zip Code 72212-1514

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

Name of Employer THE ARKANSAS FINANCIAL GROUP, INC. Occupation C.P.A./C.F.P.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2920

Amount of Each Receipt this Period
 _____ 250.00
 CONTRIBUTION

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

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

_____ 1250.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 11 OF 122

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)
MR. JOHN BORCHERT JR.
 Mailing Address 5500 HAWTHORNE ROAD
 City State Zip Code
 LITTLE ROCK AR 72207-3733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 JOHN BORCHERT, C.P.A. C.P.A.
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014
Transaction ID : SA11.3090
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EDWARD O. BOSHELL JR.
 Mailing Address 12850 SPURLING ROAD
 ROOM 208
 City State Zip Code
 DALLAS TX 75230-7218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COLUMBIA GENERAL INVESTMENTS C.E.O.
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014
Transaction ID : SA11.3011
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE S. BRADBURY
 Mailing Address 4 EDGEHILL ROAD
 City State Zip Code
 LITTLE ROCK AR 72207-5444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014
Transaction ID : SA11.3098
 Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

3200.00

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

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

FOR LINE NUMBER: PAGE 12 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS BRASWELL

Mailing Address **22 DEAUVILLE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72223-5532**

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

Name of Employer **BRASWELL AND SONS PAWNBROKERS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2200.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3002

Amount of Each Receipt this Period
2200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PORTER BRIGGS

Mailing Address **5611 KAVANAUGH BOULEVARD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4423**

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

Name of Employer **A. BRIGGS PASSPORT AND VISA EXPEDITO** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3252

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. TODD BUCHHOLZ

Mailing Address **214 GIBSON POINT**

City **SOLANA BEACH** State **CA** Zip Code **92075-4200**

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

Name of Employer **ENSO CAPITAL MANAGEMENT, L.L.C.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3064

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

5050.00

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

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

FOR LINE NUMBER: PAGE 13 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. LARRY W. BURKS

Mailing Address **72 RANCH RIDGE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72223-9674**

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

Name of Employer **BURKS A.D.R., L.L.C.** Occupation **MEDIATION/ARBITRATION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3054

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDY BYNUM

Mailing Address **5201 HAWTHORNE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-3713**

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

Name of Employer **DOVER DIXON HORNE, P.L.L.C.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11.3265

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRECK CAMPBELL

Mailing Address **1715 NORTH SPRUCE STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-5459**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2922

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. CHARLES J. CELLA

Mailing Address **705 OLIVE STREET
SUITE 804**

City **ST. LOUIS** State **MO** Zip Code **63101-2210**

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

Name of Employer **OAKLAWN RACING AND GAMING** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3043

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM CHANGOSE

Mailing Address **106 BUCKLAND PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72223-4567**

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

Name of Employer **WESTROCK GROUP** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3229

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT L. CLARKE

Mailing Address **2407 RIVER OAKS BOULEVARD**

City **HOUSTON** State **TX** Zip Code **77019-5825**

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

Name of Employer **BRACEWELL & GIULIANAI, L.L.P.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3099

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JOHN COLLINS

Mailing Address 1330 CONNECTICUT AVENUE

City WASHINGTON State DC Zip Code 20036-1704

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3028

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY P. COSTELLO

Mailing Address 3640 STRATFORD AVENUE

City DALLAS State TX Zip Code 75205-2811

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

Name of Employer NEWSTONE CAPITAL PARTNERS Occupation MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3017

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY J. CULLEN

Mailing Address P.O. BOX 3255

City LITTLE ROCK State AR Zip Code 72203-3255

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.2983

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MS. SHIRLEY D. DAVIS

Mailing Address P.O. BOX 888

City State Zip Code
POINT LOOKOUT MO 65726-0888

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3184

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOHN D. DAY

Mailing Address 5101 COUNTRY CLUB BOULEVARD

City State Zip Code
LITTLE ROCK AR 72207-4503

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

Name of Employer Occupation
U.A.M.S. NEUROSURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3136

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS F. DODSON

Mailing Address 6900 SKYWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-1745

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3241

Amount of Each Receipt this Period
25.00
CONTRIBUTION

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

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

775.00

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

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

FOR LINE NUMBER: PAGE 17 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. HELEN R. DUBOIS

Mailing Address 1545 35TH STREET, N.W.

City WASHINGTON State DC Zip Code 20007-2753

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3192

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. HELEN R. DUBOIS

Mailing Address 1545 35TH STREET, N.W.

City WASHINGTON State DC Zip Code 20007-2753

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3242

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DEJARAN DUNBAR

Mailing Address 13801 OXBOW TRAIL

City LITTLE ROCK State AR Zip Code 72206-5347

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3117

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 18 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. JANET BERRY DUNDAS

Mailing Address 10018 HOLLY SPRING DRIVE

City State Zip Code
HOUSTON TX 77042-1524

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

Name of Employer Occupation
MOHLE ADAMS C.P.A.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 24 2014

Transaction ID : SA11.3129

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. KRISTY EANES

Mailing Address 2500 NORTH TYLER STREET

City State Zip Code
LITTLE ROCK AR 72207-3743

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

Name of Employer Occupation
CATHOLIC DIOCESE OF LITTLE ROCK NETWORK ADMINISTRATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 02 2014

Transaction ID : SA11.3261

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CARRIE HENDRIX EICKENROHT

Mailing Address 11752 DUART DRIVE

City State Zip Code
HOUSTON TX 77024-2619

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT TO CHARITIES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 22 2014

Transaction ID : SA11.3089

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ROBERT A. ESTRADA

Mailing Address **805 HILLCREST STREET**

City **FORT WORTH** State **TX** Zip Code **76107-1519**

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

Name of Employer **ESTRADA HINEJOSA & COMPANY, INC.** Occupation **INVESTMENT BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3224

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SEAN M. FIELER

Mailing Address **623 FIFTH AVENUE
27TH FLOOR**

City **NEW YORK** State **NY** Zip Code **10022-6831**

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

Name of Employer **EQUINOX PARTNERS, L.P.** Occupation **FINANCIAL ANALYST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3164

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CURTIS FINCH JR.

Mailing Address **1221 GULFSHORES BLVD. N
#601**

City **NAPLES** State **FL** Zip Code **34102-**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.3274

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

2950.00

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

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

FOR LINE NUMBER: PAGE 20 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. ROBERT FINCHER

Mailing Address 2107 CANAL POINTE

City State Zip Code
LITTLE ROCK AR 72202-1429

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

Name of Employer Occupation
U.A.M.S. PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2984

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES D. FISHER

Mailing Address 5723 SOUTH COUNTRY CLUB BOULEVARD

City State Zip Code
LITTLE ROCK AR 72207-4301

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

Name of Employer Occupation
ERWIN AND COMPANY, P.A. CERTIFIED PUBLIC ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3201

Amount of Each Receipt this Period
750.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL FLOOD

Mailing Address 2200 NORTH WESTMORELAND STREET #314

City State Zip Code
ARLINGTON VA 22213-1048

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

Name of Employer Occupation
STRUCTURED FINANCE INDUSTRY GROUP DIRECTOR OF ADVOCACY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3123

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. THOMAS FORMICOLA

Mailing Address 50 HALLEN COURT

City State Zip Code
LITTLE ROCK AR 72223-5092

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MEDTRONIC, INC. REGIONAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3103

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DOAK FOSTER

Mailing Address 425 WEST CAPITOL AVENUE
SUITE 1800

City State Zip Code
LITTLE ROCK AR 72201-3525

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MITCHELL WILLIAMS LAW ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3277

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. HAYDEN FRANKS

Mailing Address 2100 COUNTRY CLUB LANE

City State Zip Code
LITTLE ROCK AR 72207-2040

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED DERMATOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3132

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. G. THOMAS FRAZIER

Mailing Address 4600 CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5434

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11.3146

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GASTON GIBSON

Mailing Address 2300 BEECHWOOD STREET

City State Zip Code
LITTLE ROCK AR 72207-2026

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11.3266

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH J. GIEZEMAN

Mailing Address 107 AQUA MARINE

City State Zip Code
SEARCY AR 72143-3054

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11.3205

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JAMES H. GLOVER

Mailing Address **6 HERITAGE PARK CIRCLE**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72116-8529**

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

Name of Employer **GLOVER TRUCK AND TRAILER SALES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3006

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSTIN W. GLOVER

Mailing Address **2617 SHENANDOAH VALLEY DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3527**

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

Name of Employer **GLOVER TRUCK AND TRAILER SALES** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3007

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE R. GOYNE

Mailing Address **3036 WESTMINSTER AVENUE**

City **DALLAS** State **TX** Zip Code **75205-1423**

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

Name of Employer **PEGASUS BANK DALLAS** Occupation **BANKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2985

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. HOLCOMB GUNN

Mailing Address 5423 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-3751

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3149

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MIKE HAIGH

Mailing Address 333 GOSHEN AVENUE

City State Zip Code
NORTH LITTLE ROCK AR 72116-8933

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3203

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID HALL

Mailing Address 12 SUNSET DRIVE

City State Zip Code
LITTLE ROCK AR 72207-1822

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

Name of Employer Occupation
CENTRAL ARKANSAS VETERANS HOSPITAL PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3131

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. DANIEL PATRICK HARDIN

Mailing Address P.O. BOX 720

City State Zip Code
HEBER SPRINGS AR 72543-0720

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3005

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RONALD HARDIN

Mailing Address 13 VALLEY CLUB CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-3436

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

Name of Employer Occupation
ARKANSAS DIGESTIVE DISEASE CLINIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11.3147

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS HARDING

Mailing Address 12 REDCOAT LANE

City State Zip Code
LITTLE ROCK AR 72227-2337

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

Name of Employer Occupation
EAST HARDING, INC. GENERAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3101

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. DANNY HARRIS

Mailing Address P.O. BOX 190663

City State Zip Code
LITTLE ROCK AR 72219-0663

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

Name of Employer Occupation
ABC SALVAGE AND SCRAP METAL, INC. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3008

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ARTHUR P. HART

Mailing Address 35 TALLYHO LANE

City State Zip Code
LITTLE ROCK AR 72227-2443

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

Name of Employer Occupation
SELF EMPLOYED C.P.A.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2902

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN E. HARVEY

Mailing Address 2201 NORTH SPRUCE

City State Zip Code
LITTLE ROCK AR 72207-4731

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

Name of Employer Occupation
ENTERPRISE FINANCIAL SOLUTIONS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2912

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY R. HATHAWAY

Mailing Address 1901 NORTH SPRUCE

City: LITTLE ROCK State: AR Zip Code: 72207-4717

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

Name of Employer: COLDWELL BANKER COMMERCIAL HATHAWAY Occupation: REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 375.00

Date of Receipt: 10 / 28 / 2014

Transaction ID : SA11.3174

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY R. HATHAWAY

Mailing Address 1901 NORTH SPRUCE

City: LITTLE ROCK State: AR Zip Code: 72207-4717

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

Name of Employer: COLDWELL BANKER COMMERCIAL HATHAWAY Occupation: REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 375.00

Date of Receipt: 11 / 01 / 2014

Transaction ID : SA11.3247

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DRAKE HAWKINS

Mailing Address 5240 EDGEWOOD ROAD

City: LITTLE ROCK State: AR Zip Code: 72207-5414

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

Name of Employer: SELF EMPLOYED Occupation: DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11.3135

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. RICHARD HAYES

Mailing Address 32 EDGEWOOD DRIVE

City CABOT State AR Zip Code 72023-2071

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

Name of Employer ARKANSAS CENTRAL PRIMARY CARE Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3050

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DEWAYNE HAYNES

Mailing Address P.O. BOX 157

City WILMOT State AR Zip Code 71676-0157

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11.3065

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JONATHAN HEITNER

Mailing Address 7923 KINGSBURY BOULEVARD #202

City CLAYTON State MO Zip Code 63105-

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

Name of Employer WELLS FARGO ADVISORS, L.L.C. Occupation FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3027

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ROBERT R. HERMANN JR.

Mailing Address 7701 FORSYTH BOULEVARD
10TH FLOOR

City ST. LOUIS State MO Zip Code 63105-1818

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

Name of Employer HERMANN COMPANIES/ANCHOR PACKAGIN Occupation PRESIDENT AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3234

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARY R. HIEGEL

Mailing Address 2120 CANAL POINTE

City LITTLE ROCK State AR Zip Code 72202-1428

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2956

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRENCH HILL

Mailing Address 7 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72207-2005

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

Name of Employer DELTA TRUST Occupation C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
663.37

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11.3260

Amount of Each Receipt this Period
199.47
CONTRIBUTION

IN-KIND PHOTOGRAPHY

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

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

1199.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM DAVID HILL

Mailing Address **38 THORNHILL**

City **SHERWOOD** State **AR** Zip Code **72120-3188**

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

Name of Employer **SELF EMPLOYED** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2967

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. ROY HERMAN HINMAN II

Mailing Address **100 ARRICOLA AVENUE**

City **SAINT AUGUSTINE** State **FL** Zip Code **32080-4515**

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

Name of Employer **ISLAND DOCTORS** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3024

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

Mailing Address **224 KINGS ROW DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72207-4117**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3240

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. HOLEKAMP

Mailing Address **5 BARCLAY WOODS DRIVE**

City **ST. LOUIS** State **MO** Zip Code **63124-1108**

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

Name of Employer **HOLEKAMP CAPITAL** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3167

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID M. HOLLO

Mailing Address **31 UPPER LADUE ROAD**

City **ST. LOUIS** State **MO** Zip Code **63124-1630**

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

Name of Employer **WELLS FARGO ADVISORS** Occupation **MANAGING DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3111

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PAUL HORNE

Mailing Address **9310 GWYNN HOLLOW COVE**

City **GERMANTOWN** State **TN** Zip Code **38139-5687**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2918

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. GARY B. HOWELL

Mailing Address **3612 JILL CIRCLE**

City **TYLER** State **TX** Zip Code **75701-8619**

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

Name of Employer **HIBBS HALLMARK AND COMPANY INSURAN** Occupation **INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3001

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JERRY M. HUNTER

Mailing Address **4545 FOREST PARK AVENUE #318**

City **ST. LOUIS** State **MO** Zip Code **63108-2172**

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

Name of Employer **BRYAN CAVE, L.L.P.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3110

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CURTIS JEFFRIES

Mailing Address **27 EAST PALISADES**

City **LITTLE ROCK** State **AR** Zip Code **72207-1903**

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

Name of Employer **STEPHENS, INC.** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2899

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. GERALD JOHNSON

Mailing Address 940 APPLE BLOSSOM LANE

City SPRINGDALE State AR Zip Code 72762-9757

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.2987

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES H. KEET

Mailing Address P.O. BOX 23602

City LITTLE ROCK State AR Zip Code 72221-3602

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

Name of Employer KEET MANAGEMENT COMPANY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11.3276

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ELICIA S. KENNEDY

Mailing Address 220 CRYSTAL COURT

City LITTLE ROCK State AR Zip Code 72205-4230

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

Name of Employer ELICIA S. KENNEDY, M.D., P.A. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3061

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. MICHAEL TODD KING

Mailing Address 10 JOHNSON RANCH ROAD

City State Zip Code
LITTLE ROCK AR 72223-9738

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3137

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LELLAND A. KINNAMAN

Mailing Address 10 VANTAGE POINT

City State Zip Code
LITTLE ROCK AR 72207-1617

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11.3208

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRIAN KLIPPENSTEIN

Mailing Address 15945 HH HIGHWAY

City State Zip Code
PLATTE CITY MO 64079-9198

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

Name of Employer Occupation
SELF EMPLOYED AGRICULTURAL CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3029

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. KAREN KOZLOWSKI

Mailing Address **2 ARMISTEAD ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5428**

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

Name of Employer **U.A.M.S.** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **861.71**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3134

Amount of Each Receipt this Period
361.71

CONTRIBUTION

IN KIND - FUNDRAISER - FOOD AND BEVERAGES

B. Full Name (Last, First, Middle Initial)
MR. CRAIG E. LABARGE

Mailing Address **111 NORTH FORSYTH BOULEVARD**

City **CLAYTON** State **MO** Zip Code **63105-3613**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3100

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JUDY LARRISON

Mailing Address **4701 WESTCHESTER DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-4371**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3197

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

2611.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. RANDY LAWSON

Mailing Address P.O. BOX 425

City BENTONVILLE State AR Zip Code 72712-0425

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

Name of Employer LAWCO ENERGY GROUP Occupation CHAIRMAN AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2915

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARL E. LINDSEY JR.

Mailing Address 64 COUNTRY CLUB CIRCLE

City SEARCY State AR Zip Code 72143-8904

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

Name of Employer SELF EMPLOYED Occupation BUSINESS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.2988

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID LOOK

Mailing Address 7007 YAMINI

City DALLAS State TX Zip Code 75230-3133

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

Name of Employer DIAGNOSTIC HEALTH SERVICES Occupation C.I.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3152

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MS. FRANCES G. LOPATA

Mailing Address 13000 RIVERCREST DRIVE

City State Zip Code
LITTLE ROCK AR 72212-1449

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3021

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WILLIAM T. MABREY SR.

Mailing Address 1708 NORTH PALM STREET

City State Zip Code
LITTLE ROCK AR 72207-5456

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

Name of Employer Occupation
MAGIE MABREY EYE CLINIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3013

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. FREDNA MAHAFFEY

Mailing Address 3720 EAST EAGLESCLIFFE DRIVE

City State Zip Code
SPRINGFIELD MO 65809-4639

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

Name of Employer Occupation
MAHAFFEY ENTERPRISES, INC. CORPORATE SECRETARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3130

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. HERBERT R. MARTIN

Mailing Address P.O. BOX 15550

City State Zip Code
LITTLE ROCK AR 72231-5550

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

Name of Employer Occupation
GRACE OIL, L.L.C. OPERATING MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3181

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES MATSON

Mailing Address 54 SHERRILL ROAD

City State Zip Code
LITTLE ROCK AR 72202-1516

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

Name of Employer Occupation
MATSON, INC. GENERAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3037

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BILL MATTHEWS

Mailing Address 47 CHEVAUX CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2928

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. DAVID MCCLARY

Mailing Address 3212 BAKER LANE

City State Zip Code
FRANKLIN TN 37064-6254

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

Name of Employer Occupation
WILLOWBROOK CAPITAL MANAGERMENT, L GENERAL PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 05 / 2014

Transaction ID : SA11.3287

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES E. MCDONALD

Mailing Address 12 SHERRILL ROAD

City State Zip Code
LITTLE ROCK AR 72202-1516

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

Name of Employer Occupation
U.A.M.S. RADIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3223

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LAUREN MCDONALD

Mailing Address 6 CYPRESS CIRCLE

City State Zip Code
NEWPORT AR 72112-4043

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3171

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 40 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JIM K. MEDLEY
 Mailing Address **2200 CARTHAGE DRIVE**
 City State Zip Code
FORT SMITH AR 72901-6820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
RETIRED RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 17 2014
Transaction ID : SA11.2958
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL MEEKS III
 Mailing Address **9 MASTERS CIRCLE**
 City State Zip Code
LITTLE ROCK AR 72212-3310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
MEEKS AND JERNIGAN, P.A. ATTORNEY AT LAW
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 20 2014
Transaction ID : SA11.3047
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MYERS MERMEL
 Mailing Address **375 PARK AVENUE**
 City State Zip Code
NEW YORK NY 10152-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
MERMEL AND MCLAIN R.E. FINANCE
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 29 2014
Transaction ID : SA11.3194
 Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JOHN NABHOLZ

Mailing Address 2337 MARTHA DRIVE

City CONWAY State AR Zip Code 72032-

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

Name of Employer NABHOLZ CONSTRUCTION Occupation INFORMATION TECHNOLOGY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1369.03

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2930

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT NEELY

Mailing Address 500 NORTH AKARD SUITE 3240

City DALLAS State TX Zip Code 75201-6628

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

Name of Employer T.C.P. REALTY Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3169

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JIM NEWELL

Mailing Address 18 RIVER RIDGE ROAD

City LITTLE ROCK State AR Zip Code 72227-1522

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2927

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. O'BRIEN

Mailing Address 3301 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2324

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 30 2014

Transaction ID : SA11.3207

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FREDERICK OERTLI

Mailing Address 12764 SPRUCE POND DRIVE

City State Zip Code
ST. LOUIS MO 63131-1118

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

Name of Employer Occupation
GUARANTEE ELECTRICAL COMPANY CHAIRMAN AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 23 2014

Transaction ID : SA11.3119

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID P. OETTING

Mailing Address 8 GLENVIEW ROAD

City State Zip Code
ST. LOUIS MO 63124-1308

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

Name of Employer Occupation
ROSENBLUM GOLDENHERSH ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 23 2014

Transaction ID : SA11.3108

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JACK OLIVER

Mailing Address P.O. BOX 50102

City Clayton State MO Zip Code 63105-5102

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

Name of Employer BRYAN CAVE, L.L.P. Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2905

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES J. PAPPAS

Mailing Address 28 SCENIC POINT

City LITTLE ROCK State AR Zip Code 72207-1924

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11.3069

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JAMES J. PAPPAS

Mailing Address 28 SCENIC POINT

City LITTLE ROCK State AR Zip Code 72207-1924

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11.3250

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JAMES PENDER

Mailing Address **415 NORTH MCKINLEY STREET**
SUITE 1200

City **LITTLE ROCK** State **AR** Zip Code **72205-3279**

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

Name of Employer **PENDER LAW FIRM, P.A.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3114

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOE PEVAHOUSE

Mailing Address **3 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5443**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3128

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOE PEVAHOUSE

Mailing Address **3 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5443**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11.3259

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
MR. EUGENE PFEIFER

Mailing Address 16300 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72223-4232

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE OWNER/MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3172

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COLONEL WILLIAM PHILIPS III

Mailing Address 103 TANGLEWOOD CIRCLE

City State Zip Code
FAIRFIELD BAY AR 72088-4501

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1575.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2908

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK T. PLAFCAN

Mailing Address 3 LIN COURT

City State Zip Code
LITTLE ROCK AR 72212-2802

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

Name of Employer Occupation
AFLAC INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3097

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. SETH POMEROY

Mailing Address **20 WINONA DRIVE**

City **MAUMELLE** State **AR** Zip Code **72113-6301**

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

Name of Employer **SELF EMPLOYED** Occupation **HEALTH CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3195

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN D. PORTER

Mailing Address **7712 GREENTREE ROAD**

City **BETHESDA** State **MD** Zip Code **20817-1428**

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

Name of Employer **WASHINGTON COUNCIL ERNST AND YOUNG** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3151

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM CHENEY PRUETT

Mailing Address **6503 WUTHERING HEIGHTS LANE**

City **TEXARKANA** State **AR** Zip Code **71854-8231**

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

Name of Employer **D.M.P. INVESTMENTS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2997

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 47 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. GEORGE L. PUGH

Mailing Address P.O. BOX 156

City State Zip Code
PORTLAND AR 71663-0156

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 17 2014

Transaction ID : SA11.2916

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN G. RAGSDALE JR.

Mailing Address 3305 GOLDEN TRAILS #201

City State Zip Code
KINGWOOD TX 77345-5111

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 20 2014

Transaction ID : SA11.3040

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARTIN M. RHODES

Mailing Address 5 LONGFELLOW PLACE

City State Zip Code
LITTLE ROCK AR 72207-3723

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

Name of Employer Occupation
STEPHENS, INC. CHIEF EXECUTIVE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 17 2014

Transaction ID : SA11.2898

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ED RILEY

Mailing Address 33 STONEWALL LANE

City MADISON State CT Zip Code 06443-2236

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

Name of Employer WELLS FARGO ADVISORS Occupation FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3044

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARTHA RILEY

Mailing Address 2309 BEECHWOOD

City LITTLE ROCK State AR Zip Code 72207-2025

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2896

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RICHARD RILEY

Mailing Address 30 RIVER RIDGE ROAD

City LITTLE ROCK State AR Zip Code 72227-1520

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

Name of Employer SELF EMPLOYED Occupation CHIROPRACTIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11.3133

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

450.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 49 OF 122

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. KENNETH V. ROBBINS

Mailing Address **4 SAVERNE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9225**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3145

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN L. ROGERS

Mailing Address **7 GAY PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72207-5132**

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

Name of Employer **LRGOGREEN.COM** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 275.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3153

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JONATHAN L. ROGERS

Mailing Address **7 GAY PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72207-5132**

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

Name of Employer **LRGOGREEN.COM** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 275.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3249

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. RICHARD ROGERS

Mailing Address 16251 DALLAS PARKWAY

City ADDISON State TX Zip Code 75001-6801

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3004

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DARRIN W. ROLAND

Mailing Address 2845 GULFSHORE DRIVE

City CONWAY State AR Zip Code 72034-8507

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

Name of Employer PACKERS PLUS Occupation OIL AND GAS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2943

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID MONTERO ROSEN

Mailing Address 251 CRADON BOULEVARD #1026

City KEY BISCAVNE State FL Zip Code 33149-1514

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

Name of Employer GRAHAM AND DODD FUND, L.L.C. Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 05 / 2014

Transaction ID : SA11.3288

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ROGER ROWE

Mailing Address 13911 LONGTREE DRIVE

City State Zip Code
LITTLE ROCK AR 72212-1957

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LAX, VAUGHN, JONES, FORTSON, AND ROW ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3059

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID RUFF

Mailing Address 51 BLUE DIAMOND DRIVE

City State Zip Code
MORRILTON AR 72110-9246

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MORRILTON PACKING COMPANY, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3218

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK B. RUMSEY

Mailing Address 4700 SOUTH 96TH STREET

City State Zip Code
FORT SMITH AR 72903-6706

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ZERO MOUNTAIN, INC. C.E.O. AND PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.3042

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. PATRICK T. SCHUECK

Mailing Address **95 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2217**

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

Name of Employer **LEXICON, INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3070

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JUSTIN J. SEALE

Mailing Address **4 ARMISTEAD ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5428**

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

Name of Employer **ARKANSAS SPECIALTY ORTHOPEDICS** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3019

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARC SHAFER

Mailing Address **62 WYNDWOOD ROAD**

City **WEST HARTFORD** State **CT** Zip Code **06107-1146**

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

Name of Employer **LINCOLN WASTE SOLUTIONS, L.L.C.** Occupation **DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3122

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. RALPH SHELNUTT

Mailing Address 2014 WATTS ROAD
SUITE E

City BENTON State AR Zip Code 72015-2898

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2910

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM SHENEP

Mailing Address 12 CHAPARRAL LANE

City LITTLE ROCK State AR Zip Code 72212-3620

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

Name of Employer DELTA TRUST AND BANK Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2986

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH SHEPARD

Mailing Address 6611 HILLCREST AVENUE
#501

City DALLAS State TX Zip Code 75205-1301

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

Name of Employer ARCHWAY CAPITAL Occupation INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3035

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. HUSTON E. SHERRILL

Mailing Address 18001 PANORAMA DRIVE

City WILDWOOD State MO Zip Code 63038-1509

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11.3109

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEN SHOLLMIER

Mailing Address 13925 BEAU VUE DRIVE

City LITTLE ROCK State AR Zip Code 72223-5166

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3020

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LINDA SUE SHOLLMIER

Mailing Address 13925 BEAU VUE DRIVE

City LITTLE ROCK State AR Zip Code 72223-5166

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3031

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ROBERT SHOPTAW

Mailing Address **21 RIVER RIDGE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72227-1523**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3041

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. SLOAN

Mailing Address **5220 STONEWALL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4522**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3034

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MALCOLM F. SMITH II

Mailing Address **9700 CHATHAM OAKS TRAIL**

City **CHARLOTTE** State **NC** Zip Code **28210-7811**

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

Name of Employer **J.P.MORGAN CHASE AND COMPANY** Occupation **UNDERWRITER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3173

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. MALCOLM F. SMITH II

Mailing Address 9700 CHATHAM OAKS TRAIL

City CHARLOTTE State NC Zip Code 28210-7811

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

Name of Employer J.P.MORGAN CHASE AND COMPANY Occupation UNDERWRITER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3246

Amount of Each Receipt this Period
25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MILDRED C. SMITH

Mailing Address 510 NORTH BROOKSIDE DRIVE #75

City LITTLE ROCK State AR Zip Code 72205-1694

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3058

Amount of Each Receipt this Period
300.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW SPEED

Mailing Address 14 GLASGOW COURT

City LITTLE ROCK State AR Zip Code 72211-2170

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

Name of Employer BKD, L.L.P. Occupation C.P.A.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3066

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

825.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. RONALD G. STEINHART

Mailing Address **25 ROBLEDO DRIVE**

City **DALLAS** State **TX** Zip Code **75230-3055**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2982

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. RUTH P. STEPHENSON

Mailing Address **2 SOUTH BRIAR HOLLOW LANE # 2**

City **HOUSTON** State **TX** Zip Code **77027-2805**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3033

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CLAYBORNE STONE

Mailing Address **50 INVERNESS CIRLCE**

City **LITTLE ROCK** State **AR** Zip Code **72212-2928**

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

Name of Employer **MITCHELL WILLIAMS** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3071

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. CLAYBORNE STONE

Mailing Address 50 INVERNESS CIRLCE

City State Zip Code
LITTLE ROCK AR 72212-2928

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

Name of Employer Occupation
MITCHELL WILLIAMS ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3155

Amount of Each Receipt this Period
150.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SANDRA STORMENT

Mailing Address 1 POINTE VISTA DRIVE

City State Zip Code
LITTLE ROCK AR 72212-3225

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11.3263

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH W. STORY

Mailing Address 7416 BECK ROAD

City State Zip Code
LITTLE ROCK AR 72223-9713

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2989

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. HENRY THOMAS

Mailing Address **36 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5462**

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

Name of Employer **U.A.M.S.** Occupation **OPHTHALMOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3012

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFERY H. THOMAS

Mailing Address **425 WEST CAPITOL AVENUE
SUITE 1800**

City **LITTLE ROCK** State **AR** Zip Code **72201-3525**

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

Name of Employer **MITCHELL WILLIAMS** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2901

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN F. THOMAS

Mailing Address **9245 VENDOME DRIVE**

City **BETHESDA** State **MD** Zip Code **20817-4029**

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

Name of Employer **JOHN F. THOMAS AND COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3102

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JOHN A. THOMPSON

Mailing Address P.O. BOX 299

City State Zip Code
LITTLE ROCK AR 72203-0299

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

Name of Employer Occupation
SELF EMPLOYED PRIVATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2990

Amount of Each Receipt this Period
750.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KELLY R. THOMPSON

Mailing Address 201 MAIN STREET
SUITE 2001

City State Zip Code
FORT WORTH TX 76102-3125

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

Name of Employer Occupation
28 V.R.R., L.L.C. INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11.3191

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. LUCILLE R. TLAPEK

Mailing Address 1 DUCLAIR COURT

City State Zip Code
LITTLE ROCK AR 72223-9571

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

Name of Employer Occupation
JPAC ENTERPRISES, INC. BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11.3254

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

4350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. KENNY A. TROUTT

Mailing Address 10595 STRAIT LANE

City State Zip Code
DALLAS TX 75229-5424

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2995

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LISA C. TROUTT

Mailing Address 10595 STRAIT LANE

City State Zip Code
DALLAS TX 75229-5424

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2996

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT H. TUCKER

Mailing Address 4 BROADVIEW TERRACE

City State Zip Code
LITTLE ROCK AR 72207-5115

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

Name of Employer Occupation
FRIDAY LAW FIRM ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3016

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM G. VOGELPOHL

Mailing Address 5310 SANFORD CIRCLE EAST

City State Zip Code
CHERRY HILLS VILLAGE CO 80113-5106

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

Name of Employer Occupation
FIRST SOUTHWEST COMPANY MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11.3067

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES VON GREMP

Mailing Address 55 CHAMPIONS BOULEVARD

City State Zip Code
ROGERS AR 72758-9568

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2993

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GUS B. WALTON

Mailing Address 48 OVERLOOK DRIVE

City State Zip Code
LITTLE ROCK AR 72207-1611

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3190

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MS. SUSIE WATKINS

Mailing Address **2210 BECKENHAM COVE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3230**

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

Name of Employer **B. BARNETT** Occupation **RETAIL SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3014

Amount of Each Receipt this Period
125.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. SUSIE WATKINS

Mailing Address **2210 BECKENHAM COVE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3230**

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

Name of Employer **B. BARNETT** Occupation **RETAIL SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3015

Amount of Each Receipt this Period
125.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JANE P. WAYLAND

Mailing Address **300 EAST THIRD STREET #801**

City **LITTLE ROCK** State **AR** Zip Code **72201-1648**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1650.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3226

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 64 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. CHRIS WHERRY

Mailing Address 17 WINDRUSH POINT

City State Zip Code
LITTLE ROCK AR 72211-4463

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

Name of Employer Occupation
RIVER CITY TURBO TECHNICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2937

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. GAY D. WHITE

Mailing Address 5424 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-3731

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3222

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE WILCOX

Mailing Address 5840 CITATIOIN DRIVE

City State Zip Code
SCOTT AR 72142-9566

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

Name of Employer Occupation
WILCOX CONTRACTING, L.L.C. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.3009

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. GREG WILLIAMS

Mailing Address **3335 TURF LANE**

City **CONWAY** State **AR** Zip Code **72034-7269**

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

Name of Employer **NABHOLZ CONSTRUCTION SERVICES** Occupation **CHIEF EXECUTIVE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3227

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK V. WILLIAMSON

Mailing Address **P.O. BOX 7503**

City **LITTLE ROCK** State **AR** Zip Code **72217-7503**

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

Name of Employer **MARK V. WILLIAMSON CO., INC.** Occupation **INSURANCE AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2350.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2893

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. W. GRANT WILLIAMS III

Mailing Address **1100 NORTH LINDBERGH BOULEVARD**

City **ST. LOUIS** State **MO** Zip Code **63132-2914**

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

Name of Employer **SOFT SURROUNDINGS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3060

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MS. MELISSA A. YOUNG

Mailing Address **27 EDNAM VILLAGE STREET**

City **CHARLOTTESVILLE** State **VA** Zip Code **22903-4636**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2931

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CLARK AND SAUER, L.L.C.

Mailing Address **7733 FORSYTH BOULEVARD
SUITE 625**

City **ST. LOUIS** State **MO** Zip Code **63105-1817**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3112

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SEE ATTRIBUTION BELOW

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN R. CLARK

Mailing Address **7733 FORSYTH BOULEVARD
SUITE 625**

City **ST. LOUIS** State **MO** Zip Code **63105-1817**

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

Name of Employer **CLARK AND SAUER, L.L.C.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3292

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

**[MEMO ITEM]
PARTNER ATTRIBUTION**

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
IRWIN PARTNERS, L.L.C.

Mailing Address 1701 CENTERVIEW DRIVE
SUITE 201

City Little Rock State AR Zip Code 72211-4312

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.2969

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

B. Full Name (Last, First, Middle Initial)
MR. JIM IRWIN

Mailing Address 7 RAQUET COURT

City Little Rock State AR Zip Code 72227-2308

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

Name of Employer Occupation
IRWIN PARTNERS COMMERCIAL REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11.3296

Amount of Each Receipt this Period
500.00

CONTRIBUTION

**[MEMO ITEM]
PARTNER ATTRIBUTION**

C. Full Name (Last, First, Middle Initial)
JSW PROPERTIES, L.L.C.

Mailing Address 2 RIVER GLEN CIRCLE

City Little Rock State AR Zip Code 72202-1424

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11.3142

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MS. JANE GILLESPIE

Mailing Address **2 RIVER GLEN CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72202-1424**

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

Name of Employer **JSW PROPERTIES, L.L.C.** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3295

Amount of Each Receipt this Period
500.00

CONTRIBUTION

**[MEMO ITEM]
PARTNER ATTRIBUTION**

B. Full Name (Last, First, Middle Initial)
LEWIS AND TAM ENTERPRISES, L.L.C.

Mailing Address **P.O. BOX 4904**

City **LITTLE ROCK** State **AR** Zip Code **72214-4904**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.2973

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

C. Full Name (Last, First, Middle Initial)
MR. JAMES LEWIS

Mailing Address **4601 FRANK ELLIS ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72210-4844**

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

Name of Employer **LEWIS AND COMPANY CONSTRUCTION** Occupation **MANAGING PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3294

Amount of Each Receipt this Period
250.00

CONTRIBUTION

**[MEMO ITEM]
PARTNER ATTRIBUTION**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
LINN PROPERTIES, L.L.C.

Mailing Address P.O. BOX 2230

City CONWAY State AR Zip Code 72033-2230

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3183

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

B. Full Name (Last, First, Middle Initial)
MR. DANNY LINN

Mailing Address P.O. BOX 2230

City CONWAY State AR Zip Code 72033-2230

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

Name of Employer Occupation
JUST SCRAP IT! METAL RECYCLING PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3293

Amount of Each Receipt this Period
500.00

CONTRIBUTION

**[MEMO ITEM]
PARTNER ATTRIBUTION**

C. Full Name (Last, First, Middle Initial)
MATTHIAS & MATTHIAS, PL

Mailing Address 700 W. MORSE BLVD., SUITE 201

City WINTER PARK State FL Zip Code 32789-

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11.3299

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

**[MEMO ITEM]
SEE ATTRIBUTION BELOW**

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. FRED W. BIEKER

Mailing Address P.O. BOX 2920

City State Zip Code
SUN VALLEY ID 83353-2920

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3300

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

EARMARKED FROM MATTHIAS & MATTHIAS, PL

B. 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

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

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

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

2500.00

101956.18

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3218

City JOHNSON CITY State TN Zip Code 37602-3218

FEC ID number of contributing federal political committee. **C** C00444471

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3165

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. FRIENDS OF JEB HENSARLING

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 820504

City DALLAS State TX Zip Code 75382-

FEC ID number of contributing federal political committee. **C** C00370650

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11.3255

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. GEORGE HOLDING FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 97187

City RALEIGH State NC Zip Code 27624-

FEC ID number of contributing federal political committee. **C** C00499236

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11.3285

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. JOHN RATCLIFFE FOR CONGRESS

Full Name (Last, First, Middle Initial)
JOHN RATCLIFFE FOR CONGRESS

Mailing Address 2931 RIDGE ROAD
SUITE 101-217

City ROCKWALL State TX Zip Code 75032-6670

FEC ID number of contributing federal political committee. **C C00554113**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3162

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. LUKE MESSER FOR CONGRESS

Full Name (Last, First, Middle Initial)
LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City SHELBYVILLE State IN Zip Code 46176-0917

FEC ID number of contributing federal political committee. **C C00460667**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11.3139

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. OLSON FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 16381

City SUGAR LAND State TX Zip Code 77496-6381

FEC ID number of contributing federal political committee. **C C00437913**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11.3286

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
WALTERS FOR CONGRESS

Mailing Address 8001 IRVINE CENTER DRIVE
#400

City IRVINE State CA Zip Code 92618-

FEC ID number of contributing federal political committee. **C C00546853**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3052

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARKANSAS MAJORITY FUND

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C C00567958**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2111.83

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3049

Amount of Each Receipt this Period
54.15
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALTICOR PAC

Mailing Address 7575 FULTON STREET EAST

City ADA State MI Zip Code 49355-0001

FEC ID number of contributing federal political committee. **C C00034884**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11.3217

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

3054.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES PAC

Mailing Address 1015 15TH STREET, N.W.

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11.3213

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASH GROVE CEMENT PAC

Mailing Address P.O. BOX 25900

City SHAWNEE MISSION State KS Zip Code 66225-5900

FEC ID number of contributing federal political committee. **C C00102517**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3185

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS PAC

Mailing Address 2300 WILSON BOULEVARD SUITE 300

City ARLINGTON State VA Zip Code 22201-5426

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11.3196

Amount of Each Receipt this Period
 3500.00
 CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
AT&T, INC. FEDERAL PAC

Mailing Address 208 SOUTH AKARD STREET
SUITE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11.3206

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BLAINE PAC

Mailing Address P.O. BOX 96

City ST. ELIZABETH State MO Zip Code 65075-

FEC ID number of contributing federal political committee. **C C00489427**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11.3093

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BLESSINGS OF LIBERTY PAC

Mailing Address 8001 IRVINE CENTER DRIVE
#400

City IRVINE State CA Zip Code 92618-2956

FEC ID number of contributing federal political committee. **C C00564658**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3053

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
CATHY MCMORRIS RODGERS PAC

Mailing Address P.O. BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11.3121

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COMERICA INCORPORATED PAC

Mailing Address P.O. BOX 75000

City State Zip Code
DETROIT MI 48275-0001

FEC ID number of contributing federal political committee. **C C00393173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.3000

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COMPASS BANC PAC

Mailing Address P.O. BOX 10566

City State Zip Code
BIRMINGHAM AL 35205-

FEC ID number of contributing federal political committee. **C C00142596**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11.3200

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DALEN PAC

Mailing Address 3131 MCKINNEY AVENUE
SUITE 720

City DALLAS State TX Zip Code 75204-2420

FEC ID number of contributing federal political committee. **C C00283523**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.2999

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EMERSON ELECTRIC COMPANY RESPONSIBLE GOVERNMENT FUND

Mailing Address 8000 WEST FLORISSANT AVENUE

City ST. LOUIS State MO Zip Code 63136-

FEC ID number of contributing federal political committee. **C C00080515**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11.3238

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ENTERPRISE HOLDINGS, INC. PAC

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105-4204

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11.3113

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 78 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
EXCELSIOR PAC

Mailing Address 430 FERDINAND DAY DRIVE

City State Zip Code
ALEXANDRIA VA 22304-8701

FEC ID number of contributing federal political committee. **C C00541078**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11.3237

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EXPRESS SCRIPTS, INC. PAC

Mailing Address ONE EXPRESS WAY

City State Zip Code
ST. LOUIS MO 63121-1824

FEC ID number of contributing federal political committee. **C C00365072**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3107

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION PAC

Mailing Address 403 EAST CAPITOL STREET, S.E.

City State Zip Code
WASHINGTON DC 20003-3810

FEC ID number of contributing federal political committee. **C C00034132**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3025

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION PAC

Mailing Address 2941 FAIRVIEW PARK DRIVE
#100

City State Zip Code
FALLS CHURCH VA 22042-

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.3280

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREATER TOMORROW PAC

Mailing Address 600 PENNSYLVANIA AVENUE
SUITE 330

City State Zip Code
WASHINGTON DC 20003-6300

FEC ID number of contributing federal political committee. **C C00526715**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11.3055

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVENUE, N.W.
SUITE 500 WEST

City State Zip Code
WASHINGTON DC 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 17 / 2014

Transaction ID : SA11.3289

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
HUCK PAC

Mailing Address **P.O. BOX 2008**

City **LITTLE ROCK** State **AR** Zip Code **72203-2008**

FEC ID number of contributing federal political committee. **C C00448373**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11.3178

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ICE PAC

Mailing Address **9158 EAST STARRING LANE**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2518**

FEC ID number of contributing federal political committee. **C C00484667**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3158

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS, INC. PAC

Mailing Address **555 12TH STREET, N.W.
SUITE 660**

City **WASHINGTON** State **DC** Zip Code **20004-1241**

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.3143

Amount of Each Receipt this Period
3000.00
 CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
JOHN S. FUND

Mailing Address P.O. BOX 853

City State Zip Code
EDWARDSVILLE IL 62025-0853

FEC ID number of contributing federal political committee. **C C00390831**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11.3091

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LIBERTY PROJECT PAC

Mailing Address P.O. BOX 53866

City State Zip Code
LUBBOCK TX 79453-3866

FEC ID number of contributing federal political committee. **C C00446625**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2548.21

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11.3204

Amount of Each Receipt this Period
 1548.21

CONTRIBUTION

IN KIND - TRANSPORTATION, MEALS, AND LODGING TO ATTEND FUNDRAISER

C. Full Name (Last, First, Middle Initial)
LOVE PAC

Mailing Address 2470 DANIELLS BRIDGE ROAD
SUITE 121

City State Zip Code
ATHENS GA 30606-6191

FEC ID number of contributing federal political committee. **C C00541680**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11.3214

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

3548.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION OF ARKANSAS

Mailing Address 14524 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72223-4702

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 17 / 2014

Transaction ID : SA11.3290

Amount of Each Receipt this Period
500.00

CONTRIBUTION

CONTRIBUTION - NON FEDERAL PAC - CONFIRMED ALL FUNDS WERE PERMISSIBLE

B. Full Name (Last, First, Middle Initial)
MR. SOUTHERN MISSOURIAN IN THE HOUSE PAC

Mailing Address P. O. BOX 30844

City State Zip Code
BETHESDA MD 20824-0844

FEC ID number of contributing federal political committee. **C** C00563726

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11.3124

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ATHLETIC TRAINERS' ASSOCIATION PAC

Mailing Address 1620 VALWOOD PARKWAY
SUITE 115

City State Zip Code
CARROLLTON TX 75006-8321

FEC ID number of contributing federal political committee. **C** C00408518

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11.3211

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. NATIONAL MULTIFAMILY HOUSING COUNCIL PAC

Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL PAC

Mailing Address 1850 M STREET, N.W.
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11.3140

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. NATIONAL PORK PRODUCERS COUNCIL PORK PAC

Full Name (Last, First, Middle Initial)
NATIONAL PORK PRODUCERS COUNCIL PORK PAC

Mailing Address P.O. BOX 10383

City DES MOINES State IA Zip Code 50306-0383

FEC ID number of contributing federal political committee. **C C00201871**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11.3279

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. NEW PIONEERS PAC

Full Name (Last, First, Middle Initial)
NEW PIONEERS PAC

Mailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00459123**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3179

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE PAC

Mailing Address **51 MADISON AVENUE**
ROOM 1109

City **NEW YORK** State **NY** Zip Code **10010-1603**

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.3030

Amount of Each Receipt this Period
 _____ 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NORANDA INTERMEDIATE HOLDING CORPORATION PAC

Mailing Address **801 CRESCENT CENTRE DR**

City **FRANKLIN** State **TN** Zip Code **37067-6224**

FEC ID number of contributing federal political committee. **C C00468876**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3125

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
OUR COUNTRY DESERVES BETTER PAC -TEA PARTY EXPRESS

Mailing Address **P.O. BOX 984**

City **WILLOWS** State **CA** Zip Code **95988-0984**

FEC ID number of contributing federal political committee. **C C00454074**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3161

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

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

_____ 4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
PEOPLE FOR ENTERPRISE, TRADE, AND ECONOMIC GROWTH

Mailing Address 7804 EVENING LANE

City ALEXANDRIA State VA Zip Code 22306-2754

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11.3180

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PHYSICIAN HOSPITALS OF AMERICA PAC

Mailing Address 2025 M STREET, N.W.
SUITE 800

City WASHINGTON State DC Zip Code 20036-2422

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11.3074

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PIONEER POLITICAL ACTION COMMITTEE

Mailing Address 701 8TH STREET, N.W.
SUITE 500

City WASHINGTON State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00325357

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3157

Amount of Each Receipt this Period
 4000.00

CONTRIBUTION

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 86 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC

Mailing Address **8700 WEST BRYN MAWR AVENUE
SUITE 1200S**

City **CHICAGO** State **IL** Zip Code **60631-3512**

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : **SA11.3056**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION, INC.

Mailing Address **1006 PENDLETON STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314-1837**

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **10000.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : **SA11.3175**

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE

Mailing Address **801 PENNSYLVANIA AVE., N.W.
SUITE 720**

City **WASHINGTON** State **DC** Zip Code **20004-2686**

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : **SA11.3275**

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION PAC

Mailing Address 1015 15TH STREET, N.W.
SUITE 920

City WASHINGTON State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3156

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REPUBLICAN JEWISH COALITION PAC

Mailing Address 50 F STREET, N.W.
SUITE 100

City WASHINGTON State DC Zip Code 20001-1590

FEC ID number of contributing federal political committee. **C C00345132**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11.2998

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHENS INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 111 CENTER ST

City LITTLE ROCK State AR Zip Code 72201-4402

FEC ID number of contributing federal political committee. **C C00166553**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11.3220

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 88 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
SUPPORT TO ENSURE VICTORY EVERYWHERE PAC

Mailing Address **228 SOUTH WASHINGTON STREET
SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00501478**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11.3104

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TEXAS SPINE AND JOINT HOSPITAL, LTD. PAC

Mailing Address **1814 ROSELAND BOULEVARD**

City **TYLER** State **TX** Zip Code **75701-4234**

FEC ID number of contributing federal political committee. **C C00437525**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11.2994

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE GOOD FUND

Mailing Address **P.O. BOX 3404**

City **ALEXANDRIA** State **VA** Zip Code **22302-0404**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11.3159

Amount of Each Receipt this Period
3000.00
CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
THE NATIONAL RIGHT TO WORK COMMITTEE PAC

Mailing Address 8001 BRADDOCK ROAD
SUITE 500

City Springfield State VA Zip Code 22151-2125

FEC ID number of contributing federal political committee. **C** C00395533

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11.3166

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE SOCIETY OF THORACIC SURGEONS PAC

Mailing Address 20 F STREET, N.W.
SUITE 310 C

City Washington State DC Zip Code 20001-6700

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11.3271

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS, INC.

Mailing Address 430 FIRST STREET, S.E.

City Washington State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11.3057

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT

Mailing Address **700 13TH STREET, N.W.
SUITE 350**

City State Zip Code
WASHINGTON DC 20005-3960

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 27 2014

Transaction ID : SA11.3163

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
USA RICE FEDERATION PAC

Mailing Address **2101 WILSON BOULEVARD
SUITE 610**

City State Zip Code
ARLINGTON VA 22201-3040

FEC ID number of contributing federal political committee. **C C00308478**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 27 2014

Transaction ID : SA11.3160

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
VIKING LEADERSHIP PAC

Mailing Address **P.O. BOX 4616**

City State Zip Code
ST. PAUL MN 55101-4616

FEC ID number of contributing federal political committee. **C C00565036**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 03 2014

Transaction ID : SA11.3272

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 122
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
WIN NOVEMBER PAC

Mailing Address 1345 SOUTH CAPITOL STREET, S.W.
#1004

City WASHINGTON State DC Zip Code 20003-3593

FEC ID number of contributing federal political committee. **C** C00516013

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11.3236

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

102202.36

**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 92 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MARY ASHLEIGH BIERBAUM		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I1058
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARY ASHLEIGH BIERBAUM		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I1099
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ISAAC FOLEY		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I1059
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3750.00
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 93 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ISAAC FOLEY		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I1100
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ISAAC FOLEY		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 71.91 Transaction ID : SB17.I1106
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement REIMBURSEMENT - MILEAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MR. ROBERT HERMANN		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 7701 FORSYTH BOULEVARD 10TH FLOOR		Amount of Each Disbursement this Period 729.00 Transaction ID : SB17.I1120
City ST. LOUIS State MO Zip Code 63105	Purpose of Disbursement REIMBURSEMENT -FOOD, BEVERAGES, AND ROOM RENTAL FOR FUNDRAISING EVENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2050.91
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 94 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. MR. FRENCH HILL		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 7 CANTRELL ROAD		Amount of Each Disbursement this Period 199.47
City LITTLE ROCK	State AR	
Zip Code 72207-2005	Purpose of Disbursement IN-KIND CONTRIBUTION	Transaction ID : SB17.3260
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND PHOTOGRAPHY
State: District:		

Full Name (Last, First, Middle Initial) B. DR. KAREN KOZLOWSKI		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2 ARMISTEAD ROAD		Amount of Each Disbursement this Period 361.71
City LITTLE ROCK	State AR	
Zip Code 72207-5428	Purpose of Disbursement IN-KIND CONTRIBUTION	Transaction ID : SB17.3134
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN KIND - FUNDRAISER - FOOD AND BEVERAGES
State: District:		

Full Name (Last, First, Middle Initial) C. CATHERINE L LANIER		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 1750.00
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I1060
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2311.18
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 95 OF 122		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CATHERINE L LANIER		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.I1101
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. MRS. MISSY RICKELS		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 311 MCMILLEN TRAIL		Amount of Each Disbursement this Period 59.95 Transaction ID : SB17.I1124
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement REIMBURSEMENT - BALLOONS FOR FUNDRAISER	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I1061
City LITTLE ROCK	State AR	
Zip Code 72217	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5559.95
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 96 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I1102
City LITTLE ROCK	State AR	
Zip Code 72217	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. MR. WILLIAM WALKER		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 6213 LOCKE LANE		Amount of Each Disbursement this Period 1180.00 Transaction ID : SB17.I1048
City HOUSTON	State TX	
Zip Code 77057	Purpose of Disbursement CONSULTING - FUNDRAISING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. ADVANCE PRINT SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 4201 S. SHACKLEFORD SUITE C		Amount of Each Disbursement this Period 2056.56 Transaction ID : SB17.I1053
City LITTLE ROCK	State AR	
Zip Code 72204	Purpose of Disbursement PRINTING SERVICES -ENVELOPES, INVITATIONS, CONTRIBUTION _CARDS LETTERHEAD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6986.56
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 97 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ADVANCE PRINT SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 4201 S. SHACKLEFORD SUITE C		Amount of Each Disbursement this Period 1547.29
City LITTLE ROCK State AR Zip Code 72204	Purpose of Disbursement PRINTING - INVITATIONS AND ENVELOPES	
Candidate Name		Transaction ID : SB17.I1107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ARKANSAS PRESS ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 411 SOUTH VICTORY		Amount of Each Disbursement this Period 2429.91
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement ADVERTISING - NEWSPAPER	
Candidate Name		Transaction ID : SB17.I1056
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ARKANSAS PRESS ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 411 SOUTH VICTORY		Amount of Each Disbursement this Period 9836.39
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement ADVERTISING -NEWSPAPER	
Candidate Name		Transaction ID : SB17.I1110
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	13813.59
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 98 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ARKANSAS PRESS ASSOCIATION			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 411 SOUTH VICTORY			Amount of Each Disbursement this Period 2157.00 Transaction ID : SB17.I1114
City LITTLE ROCK	State AR	Zip Code 72201	
Purpose of Disbursement ADVERTISING -NEWSPAPER		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. BRIDGE MAJORITY			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2 WEST WINDSOR AVENUE			Amount of Each Disbursement this Period 308.71 Transaction ID : SB17.I898
City ALEXANDRIA	State VA	Zip Code 22301	
Purpose of Disbursement CONSULTING - FUNDRAISING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. CAMPAIGN MAIL & DATA, INC. DBA CMDI			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 1593 SPRING HILL ROAD SUITE 400			Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I1134
City TYSONS CORNER	State VA	Zip Code 22182	
Purpose of Disbursement SOFTWARE		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3263.71
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 99 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. CANON SOLUTIONS AMERICA, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 721 WEST 9TH STREET			Amount of Each Disbursement this Period 103.34	
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I1112	
Purpose of Disbursement PRINTING SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CANON SOLUTIONS AMERICA, INC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014	
Mailing Address 721 WEST 9TH STREET			Amount of Each Disbursement this Period 12.24	
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I1123	
Purpose of Disbursement PRINTING SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. COMCAST			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 1701 JOHN F KENNEDY BOULEVARD			Amount of Each Disbursement this Period 109.31	
City PHILADELPHIA	State PA	Zip Code 19103	Transaction ID : SB17.I1046	
Purpose of Disbursement INTERNET AND CABLE SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	224.89
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 100 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. COMCAST

Mailing Address 1701 JOHN F KENNEDY BOULEVARD

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement INTERNET AND CABLE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 109.31

Transaction ID : SB17.I1118

Full Name (Last, First, Middle Initial)
B. CRESTVIEW PROPERTIES, INC.

Mailing Address 3700 KAVANAUGH BOULEVARD SUITE A

City LITTLE ROCK State AR Zip Code 72205

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2014

Amount of Each Disbursement this Period: 1200.00

Transaction ID : SB17.I1047

Full Name (Last, First, Middle Initial)
C. CRESTVIEW PROPERTIES, INC.

Mailing Address 3700 KAVANAUGH BOULEVARD SUITE A

City LITTLE ROCK State AR Zip Code 72205

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 1200.00

Transaction ID : SB17.I1121

SUBTOTAL of Disbursements This Page (optional)..... 2509.31

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 101 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. ECA STRATEGIES

Full Name (Last, First, Middle Initial)
Mailing Address 12404 PARK CENTRAL DRIVE
SUITE 400

City DALLAS State TX Zip Code 75251

Purpose of Disbursement FUNDRAISER -FOOD/BEVERAGES/RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2014

Amount of Each Disbursement this Period: 442.46

Transaction ID : SB17.I1045

B. IMPACT MANAGEMENT

Full Name (Last, First, Middle Initial)
Mailing Address 124 WEST CAPITOL AVENUE
SUITE 1886

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement GET OUT THE VOTE PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 6241.06

Transaction ID : SB17.I1119

C. IMPACT MANAGEMENT

Full Name (Last, First, Middle Initial)
Mailing Address 124 WEST CAPITOL AVENUE
SUITE 1886

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement GET OUT THE VOTE PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 08 / 2014

Amount of Each Disbursement this Period: 1410.01

Transaction ID : SB17.I1126

SUBTOTAL of Disbursements This Page (optional) 8093.53

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 102 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. JAI LAMBERT		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2014
Mailing Address 9 CONNELL DRIVE		Amount of Each Disbursement this Period 2050.00
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement GRAPHIC DESIGN SERVICES	Transaction ID : SB17.I1125
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LOG CABIN DEMOCRAT		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1111 MAIN STREET SUITE 102		Amount of Each Disbursement this Period 1417.50
City CONWAY	State AR	
Zip Code 72032	Purpose of Disbursement ADVERTISING - NEWSPAPER	Transaction ID : SB17.I1055
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OMNI AIR CHARTER AND FBO		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 2008 BECKENHAM COVE		Amount of Each Disbursement this Period 2675.00
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1109
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6142.50
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 103 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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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 10 / 31 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 662.02	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES	Transaction ID : SB17.I1062	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

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 11 / 14 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 662.02	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES	Transaction ID : SB17.I1103	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

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 10 / 31 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 65.00	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL SERVICE CHARGE	Transaction ID : SB17.I1131	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	1389.04
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 104 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 911 PANORAMA TRAIL SOUTH

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAYROLL SERVICE CHARGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 14 / 2014

Amount of Each Disbursement this Period: 65.00

Transaction ID : SB17.I1132

B. RAISE THE MONEY, INC.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2014

Amount of Each Disbursement this Period: 77.75

Transaction ID : SB17.I1133

C. RED RIGHT STRATEGIES

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 600254

City DALLAS State TX Zip Code 75360

Purpose of Disbursement
CONSULTING - DIGITAL MEDIA

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2014

Amount of Each Disbursement this Period: 1581.16

Transaction ID : SB17.I1049

SUBTOTAL of Disbursements This Page (optional) 1723.91

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 105 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. RED RIGHT STRATEGIES

Mailing Address P.O. BOX 600254

City DALLAS State TX Zip Code 75360

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 1565.00

Transaction ID : SB17.I1117

Category/Type

Full Name (Last, First, Middle Initial)
B. SEARCY REGIONAL CHAMBER

Mailing Address 2323 SOUTH MAIN STREET

City SEARCY State AR Zip Code 72143

Purpose of Disbursement BOOTH FOR FESTIVAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 10.00

Transaction ID : SB17.I1111

Category/Type

Full Name (Last, First, Middle Initial)
C. SECURITY BANKCARD

Mailing Address P.O. BOX 22116

City TULSA State OK Zip Code 74121

Purpose of Disbursement CREDIT CARD PAYMENT -SEE ATTACHED MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 29.00

Transaction ID : SB17.I1050

Category/Type

SUBTOTAL of Disbursements This Page (optional) 1604.00

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 106 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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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 10 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 29.00
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD FEE	Transaction ID : SB17.I1115
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 20622.37
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT -SEE ATTACHED MEMO	Transaction ID : SB17.I1051
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENTS - SEE MEMO ITEMS
State: District:		

Full Name (Last, First, Middle Initial) C. ACE HARDWARE		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address CANTRELL		Amount of Each Disbursement this Period 35.90
City LITTLE ROCK	State AR	
Zip Code 72223	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1082
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20622.37
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 107 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 11.96
City DFW AIRPORT	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I1068	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 818.20
City DFW AIRPORT	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I1073	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 55.15
City DALLAS	State TX	Zip Code 75202
Purpose of Disbursement CELL PHONE SERVICES	Category/Type	
Candidate Name	Transaction ID : SB17.I1065	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 108 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. COBBLESTONE AND VINE		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2314 CANTRELL ROAD		Amount of Each Disbursement this Period 39.24
City LITTLE ROCK	State AR	Zip Code 72202
Purpose of Disbursement FUNDRAISING EVENT SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1066 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. FACEBOOK ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1601 WILLOW ROAD		Amount of Each Disbursement this Period 674.25
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement ADVERTISING - INTERNET		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1077 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. FACEBOOK ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 1601 WILLOW ROAD		Amount of Each Disbursement this Period 770.48
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement ADVERTISING - INTERNET		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I1086 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 109 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. FACEBOOK ADVERTISING

Mailing Address 1601 WILLOW ROAD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 114.94

Transaction ID : SB17.I1091

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
B. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1064

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
C. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1067

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 110 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1076

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
B. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 20 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1079

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
C. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1084

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 111 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1085

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
B. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1093

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
C. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1094

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

SUBTOTAL of Disbursements This Page (optional) 0.00

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 112 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. GOOGLE ADS

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I1097

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
B. OFFICE DEPOT, INC.

Mailing Address 2600 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 15.16

Transaction ID : SB17.I1069

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

Full Name (Last, First, Middle Initial)
C. OFFICE DEPOT, INC.

Mailing Address 2600 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 65.58

Transaction ID : SB17.I1071

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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 113 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 833.00
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1074
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 16.34
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1080
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 23.20
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1087
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 114 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 15.46
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1089
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 297.14
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1092
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 16.86
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1096
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 115 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 181.10

Transaction ID : SB17.I1072

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 N FAIRFAX ST #40

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 10681.03

Transaction ID : SB17.I1098

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

C. TRIVIA MARKETING

Full Name (Last, First, Middle Initial)
Mailing Address 1100 W. MARKHAM STREET

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement ADVERTISING - INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2014

Amount of Each Disbursement this Period: 337.36

Transaction ID : SB17.I1088

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/23/14

SUBTOTAL of Disbursements This Page (optional) 0.00

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 116 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address FOREST PARK STATION		Amount of Each Disbursement this Period 147.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1075
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address FOREST PARK STATION		Amount of Each Disbursement this Period 748.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1078
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address FOREST PARK STATION		Amount of Each Disbursement this Period 98.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1083
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 117 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 36.48
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1063
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 18.47
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1070
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 23.77
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1081
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 118 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 36.42
City LITTLE ROCK	State AR	Zip Code 72202
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
Candidate Name	Transaction ID : SB17.I1090	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 11.88
City LITTLE ROCK	State AR	Zip Code 72202
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
Candidate Name	Transaction ID : SB17.I1095	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/23/14
State: District:		

Full Name (Last, First, Middle Initial) C. STRATEGIC INFORMATION CONSULTANTS		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 7108 WOODED GORGE DRIVE		Amount of Each Disbursement this Period 2500.00
City TALLAHASSEE	State FL	Zip Code 32312
Purpose of Disbursement RESEARCH	Category/Type	
Candidate Name	Transaction ID : SB17.I1108	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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 119 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial)
A. STRATEGIC INFORMATION CONSULTANTS

Mailing Address 7108 WOODED GORGE DRIVE

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement RESEARCH

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.I1116

Full Name (Last, First, Middle Initial)
B. THE LEADER

Mailing Address 404 GRAHAM ROAD

City JACKSONVILLE State AR Zip Code 72016

Purpose of Disbursement ADVERTISING -NEWSPAPER

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 686.70

Transaction ID : SB17.I1113

Full Name (Last, First, Middle Initial)
C. THE VILLAGE KVRE 92.2 FM

Mailing Address 122 DESOTS CENTER DRIVE

City HOT SPRINGS VILLAG State AR Zip Code 71909

Purpose of Disbursement ADVERTISING -RADIO

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 21 / 2014

Amount of Each Disbursement this Period: 192.00

Transaction ID : SB17.I1122

SUBTOTAL of Disbursements This Page (optional)..... 5878.70

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 120 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE WICKERS GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 1819 POLK STREET #373		Amount of Each Disbursement this Period 30000.00 Transaction ID : SB17.I1057
City SAN FRANCISCO State CA Zip Code 94109	Category/Type	
Purpose of Disbursement MEDIA BUY - RADIO AND TELEVISION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE WICKERS GROUP		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 1819 POLK STREET #373		Amount of Each Disbursement this Period 561.00 Transaction ID : SB17.I1105
City SAN FRANCISCO State CA Zip Code 94109	Category/Type	
Purpose of Disbursement MEDIA BUY - RADIO		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE WICKERS GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1819 POLK STREET #373		Amount of Each Disbursement this Period 70000.00 Transaction ID : SB17.I1135
City SAN FRANCISCO State CA Zip Code 94109	Category/Type	
Purpose of Disbursement MEDIA BUY - RADIO AND TELEVISION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	100561.00
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 121 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. THE WICKERS GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1819 POLK STREET #373		Amount of Each Disbursement this Period 951.00 Transaction ID : SB17.I897
City SAN FRANCISCO State CA Zip Code 94109	Purpose of Disbursement CONSULTING - STRATEGY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. YE OLDE DAISY SHOPPE		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2014
Mailing Address 1308 OAK STREET		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.I1104
City CONWAY State AR Zip Code 72034	Purpose of Disbursement BALLOONS FOR GET OUT THE VOTE RALLY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LIBERTY PROJECT PAC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address P.O. BOX 53866		Amount of Each Disbursement this Period 1548.21 Transaction ID : SB17.3204
City LUBBOCK State TX Zip Code 79453-3866	Purpose of Disbursement IN-KIND CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2699.21
TOTAL This Period (last page this line number only).....	191684.36

**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 122 OF 122	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. PULASKI COUNTY REPUBLICAN WOMEN		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address P.O. BOX 17303		Amount of Each Disbursement this Period 500.00
City LITTLE ROCK	State AR	
Zip Code 72222	Purpose of Disbursement REFUND OF CONTRIBUTION	Transaction ID : SB20B.I1052
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
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		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
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).....	500.00
TOTAL This Period (last page this line number only).....	500.00