

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Working America		3. FEC Identification Number C C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St., N.W.		
(c) City, State and ZIP Code Washington DC 20006		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report 24-Hour Notice 48-Hour Notice
- July 15 Quarterly Report
- October Quarterly Report
- January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM / /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES.....

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Liz Towne

04/08/2010

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
AFSCME

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1625 L St., NW

Amount

2220.14

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Rental of phone center

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 13159.74

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
AFSCME

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1625 L St., NW

Amount

2220.14

City State Zip Code
Washington DC 20036

Purpose of Expenditure
Rental of phone center

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 15379.88

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Jessica Akers

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
2221 Wentwood Valley Dr. #44

Amount

176.51

City State Zip Code
Little Rock AR 72212

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1765.10

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

4616.79

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Jessica Akers

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
2221 Wentwood Valley Dr. #44

Amount

176.51

City State Zip Code
Little Rock AR 72212

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1941.61

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Brian Barnett

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
100 Dennison St. Apt 3

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1355.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Brian Barnett

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
100 Dennison St. Apt 3

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1478.40

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

422.91

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10930478741
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)
 Working America

Full Name (Last, First, Middle Initial) of Payee Ronnie Beulah		Date MM / DD / YYYY 04 / 07 / 2010
Mailing Address 302 East Roosevelt		Amount 123.20
City Little Rock	State AR	Zip Code 72206

Purpose of Expenditure Salary and benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	123.20	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ryan Budman		Date MM / DD / YYYY 04 / 06 / 2010
Mailing Address 5701 Cochiti Dr, NW		Amount 25.00
City Albuquerque	State NM	Zip Code 87120

Purpose of Expenditure Per diem	Category/ Type	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	1132.55	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ryan Budman		Date MM / DD / YYYY 04 / 06 / 2010
Mailing Address 5701 Cochiti Dr, NW		Amount 176.51
City Albuquerque	State NM	Zip Code 87120

Purpose of Expenditure Salary and benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Halter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	1309.06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	324.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Ryan Budman

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
5701 Cochiti Dr, NW

Amount

176.51

City State Zip Code
Albuquerque NM 87120

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1485.57

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Ryan Budman

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
5701 Cochiti Dr, NW

Amount

25.00

City State Zip Code
Albuquerque NM 87120

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1510.57

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
BWI Airport Taxi

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
7062 Friendship Road

Amount

100.00

City State Zip Code
BWI Airport MD 21240

Purpose of Expenditure
Cab fare

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 100.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

301.51

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Jeffrey Campbell

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
701 Green Mountain Drive #604

Amount

123.20

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 246.40

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Jeffrey Campbell

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
701 Green Mountain Drive #604

Amount

123.20

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 369.60

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Stanley Cash

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1622 Gaines

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Benjamin Cole

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
5003 Omega St

Amount

123.20

City State Zip Code
Little Rock AR 72117

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 369.60

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Anderson Coleman

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1502 Green Mountain Dr. Apt 194

Amount

123.20

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1108.80

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Anderson Coleman

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1502 Green Mountain Dr. Apt 194

Amount

123.20

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1232.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Johnna Cox

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
10950 Frenchman Loop
Apt. C

Amount

123.20

City State Zip Code
North Little Rock AR 72113

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Crown Plaza

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
201 South Shackelford Rd

Amount

66.90

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Lodging

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 869.70

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Paul Dailey

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1622 Gaines,

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

313.30

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Keith Daniels

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
501 Napa Valley Drive
Apt. 824

Amount

123.20

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Delta Airlines

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
P.O. Box 20706

Amount

25.00

City State Zip Code
Atlanta GA 30320

Purpose of Expenditure
Baggage Fee

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 110.00

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Democrat Gazette

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
PO Box 2221

Amount

86.04

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Job ad

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 258.13

Disbursement For: Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

234.24

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Democrat Gazette

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
PO Box 2221

Amount

86.04

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Job ad

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 344.17

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Gaelynn Dooley

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
95 W. 1st Ave Apt 1

Amount

25.00

City State Zip Code
Columbus OH 43215

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3479.52

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Gaelynn Dooley

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
95 W. 1st Ave Apt 1

Amount

218.18

City State Zip Code
Columbus OH 43215

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3697.70

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

329.22

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Gaelynn Dooley

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
95 W. 1st Ave Apt 1

Amount

218.18

City State Zip Code
Columbus OH 43215

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3915.88

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Gaelynn Dooley

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
95 W. 1st Ave Apt 1

Amount

25.00

City State Zip Code
Columbus OH 43215

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3940.88

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Extended Stay Hotel

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
Hardin Rd

Amount

138.14

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Housing

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2149.86

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

381.32

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Extended Stay Hotel

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
Hardin Rd

Amount

1.81

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Housing

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2151.67

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Extended Stay Hotel

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
Hardin Rd

Amount

138.14

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Housing

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2289.81

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Extended Stay Hotel

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
Hardin Rd

Amount

1.81

City State Zip Code
Little Rock AR 72203

Purpose of Expenditure
Housing

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2291.62

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

141.76

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
LaDonna Ford

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1803 South Battery St.

Amount

123.20

City State Zip Code
Little Rock AR 72202

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
William Green

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1205 Vestal

Amount

123.20

City State Zip Code
North Little Rock AR 72114

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Willie Holmes

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
2220 S. State St. Apt 3

Amount

218.18

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3272.70

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

464.58

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Willie Holmes

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
2220 S. State St. Apt 3

Amount

218.18

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3490.88

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Adrina Jennings

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
722 W. 47th St

Amount

123.20

City State Zip Code
North Little Rock AR 72218

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1108.80

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Adrina Jennings

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
722 W. 47th St

Amount

123.20

City State Zip Code
North Little Rock AR 72218

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1232.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

464.58

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
job.com

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
100 Riverside Parkway,suite 201

Amount

199.00

City State Zip Code
Fredericksburg VA 22406

Purpose of Expenditure
Job ac

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 199.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Steve Karbowskiak

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
4195 West 22nd St

Amount

25.00

City State Zip Code
Cleveland OH 44109

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2190.10

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Steve Karbowskiak

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
4195 West 22nd St

Amount

176.51

City State Zip Code
Cleveland OH 44109

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2366.61

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

400.51

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Steve Karbowiak

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
4195 West 22nd St

Amount

176.51

City State Zip Code
Cleveland OH 44109

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2543.12

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Steve Karbowiak

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
4195 West 22nd St

Amount

25.00

City State Zip Code
Cleveland OH 44109

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2568.12

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Frederick Manning

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
317 West Indiana St

Amount

123.20

City State Zip Code
Beebe AR 72012

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 369.60

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

324.71

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Frederick Manning

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
317 West Indiana St

Amount

123.20

City State Zip Code
Beebe AR 72012

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 492.80

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Arvin Marlowe

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
302 East Roosevelt

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Arvin Marlowe

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
302 East Roosevelt

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 246.40

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Henry Miller

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1000 E. 9th St

Amount

123.20

City State Zip Code
Little Rock AR 72202

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1108.80

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Henry Miller

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1000 E. 9th St

Amount

123.20

City State Zip Code
Little Rock AR 72202

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1232.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
John Morgan

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1805 Marshall Dr

Amount

123.20

City State Zip Code
Little Rock AR 72202

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 616.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
John Morgan

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1805 Marshall Dr

Amount

123.20

City State Zip Code
Little Rock AR 72202

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 739.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Matt Morrison

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1601 Argonne PI NW

Amount

45.00

City State Zip Code
Washington DC 20009

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 90.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Matt Morrison

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1601 Argonne PI NW

Amount

45.00

City State Zip Code
Washington DC 20009

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 135.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

213.20

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee

Tony Orr

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address

28 Bentley Circle

Amount

123.20

City

Little Rock

State

AR

Zip Code

72210

Purpose of Expenditure

Salary and benefits

Category/
Type

Office Sought:

House

State: AR

Senate

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bill Halter

Calendar Year-To-Date Per Election
for Office Sought

862.40

Disbursement For:
2010

Primary

General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Tony Orr

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address

28 Bentley Circle

Amount

123.20

City

Little Rock

State

AR

Zip Code

72210

Purpose of Expenditure

Salary and benefits

Category/
Type

Office Sought:

House

State: AR

Senate

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bill Halter

Calendar Year-To-Date Per Election
for Office Sought

985.60

Disbursement For:
2010

Primary

General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Cassie Pierce

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address

827 Wilson Street

Amount

123.20

City

Malvern

State

AR

Zip Code

72104

Purpose of Expenditure

Salary and benefits

Category/
Type

Office Sought:

House

State: AR

Senate

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Bill Halter

Calendar Year-To-Date Per Election
for Office Sought

123.20

Disbursement For:
2010

Primary

General

Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Cassie Pierce

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
827 Wilson Street

Amount

123.20

City State Zip Code
Malvern AR 72104

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 246.40

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mary Richards

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1203 Emerson St. Apt 21

Amount

25.00

City State Zip Code
Denver CO 90218

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2190.10

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mary Richards

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1203 Emerson St. Apt 21

Amount

176.51

City State Zip Code
Denver CO 90218

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2366.61

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

324.71

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Mary Richards

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1203 Emerson St. Apt 21

Amount

176.51

City State Zip Code
Denver CO 90218

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2543.12

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mary Richards

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1203 Emerson St. Apt 21

Amount

25.00

City State Zip Code
Denver CO 90218

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2568.12

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
SJP Pit Stop

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
3300 Bankhead Dr

Amount

14.36

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Gas

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 36.29

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

215.87

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Joshua Smedley

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
302 East Roosevelt

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Joshua Smedley

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
302 East Roosevelt

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 246.40

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Scott Sneddon

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
440 Rocky Springs Dr

Amount

25.00

City State Zip Code
Blacklick OH 43004

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2855.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

271.40

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Scott Sneddon

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
440 Rocky Springs Dr

Amount

202.50

City State Zip Code
Blacklick OH 43004

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3057.50

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Scott Sneddon

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
440 Rocky Springs Dr

Amount

202.50

City State Zip Code
Blacklick OH 43004

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3260.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Scott Sneddon

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
440 Rocky Springs Dr

Amount

25.00

City State Zip Code
Blacklick OH 43004

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3285.00

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

430.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Samuel Snodgrass

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
302 E. Roosevelt

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 862.40

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Corey Spangler

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
2 Helen St Apt 4

Amount

176.51

City State Zip Code
Ward AR 72176

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1765.10

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Corey Spangler

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
2 Helen St Apt 4

Amount

176.51

City State Zip Code
Ward AR 72176

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1941.61

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

476.22

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Todd Speight

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
322 E Kelso Rd

Amount

25.00

City State Zip Code
Columbus OH 43202

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 638.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Todd Speight

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
322 E Kelso Rd

Amount

25.00

City State Zip Code
Columbus OH 43202

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 663.00

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Staples

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
12309 Chenal Parkway

Amount

49.41

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Office supplies

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 616.63

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

99.41

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Staples

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
12309 Chenal Parkway

Amount

21.49

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Office supplies

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 638.12

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Staples

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
12309 Chenal Parkway

Amount

242.90

City State Zip Code
Little Rock AR 72211

Purpose of Expenditure
Office supplies

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 881.02

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Kyle Taylor

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Dr, #3

Amount

25.00

City State Zip Code
Tampa FL 33336

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1176.94

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

289.39

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Kyle Taylor

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Dr, #3

Amount

185.36

City State Zip Code
Tampa FL 33336

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1362.30

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Kyle Taylor

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Dr, #3

Amount

185.36

City State Zip Code
Tampa FL 33336

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1547.66

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Kyle Taylor

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Dr, #3

Amount

25.00

City State Zip Code
Tampa FL 33336

Purpose of Expenditure
Per diem

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1572.66

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

395.72

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Moksheda Thapa

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
3804 W. Capitol Ave

Amount

123.20

City State Zip Code
Little Rock AR 72205

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 862.40

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Moksheda Thapa

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
3804 W. Capitol Ave

Amount

123.20

City State Zip Code
Little Rock AR 72205

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 985.60

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Darryl Thomas

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1809 Vance St.

Amount

123.20

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

81.27

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Car rental

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5320.81

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

113.70

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Rental car

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5434.51

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

53.58

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Rental car

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5488.09

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

248.55

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

81.27

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Rental car

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5569.36

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

113.71

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Rental car

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5683.07

Disbursement For: 2010 Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
1 Airport Dr

Amount

53.58

City State Zip Code
Little Rock AR 72206

Purpose of Expenditure
Rental car

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5736.65

Disbursement For: 2010 Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

248.56

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Kerri Toomer

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
7603 Jacksonville Cutoff
Apt. 60

Amount

123.20

City State Zip Code
Jacksonville AR 72076

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 123.20

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Jonathan Turner

Date

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Circle, Apt 301

Amount

123.20

City State Zip Code
Tampa FL 33610

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 369.60

Disbursement For: Primary General
2010
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Jonathan Turner

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
10110 Douglas Oaks Circle, Apt 301

Amount

123.20

City State Zip Code
Tampa FL 33610

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 492.80

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

369.60

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Aaron Watkins

Date

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 0

Mailing Address
100 Dennison St. Apt 3

Amount

123.20

City State Zip Code
Little Rock AR 72210

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: House State: AR
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Bill Halter

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1232.00

Disbursement For: Primary General
2010
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

123.20

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

14643.57