

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 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

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 in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 2014

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 10 / 15 / 2014

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

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))....	569129.20	1846940.89
(b) Total Contribution Refunds (from Line 20(d))	2000.00	2300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	567129.20	1844640.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	581613.70	1391137.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	46750.00	46750.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	534863.70	1344387.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	506503.55	
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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

French Hill for Arkansas

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	358156.20	1471461.22
(ii) Unitemized.....	16673.00	55729.67
(iii) TOTAL of contributions from individuals ▶	374829.20	1527190.89
(b) Political Party Committees.....	2550.00	8800.00
(c) Other Political Committees (such as PACs).....	191750.00	310950.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	569129.20	1846940.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	6250.62	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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	46750.00	46750.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	622129.82	1899941.51

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	581613.70	1391137.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	2300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	583613.70	1393437.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	467987.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	622129.82
25. SUBTOTAL (add Line 23 and Line 24).....	1090117.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	583613.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	506503.55

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

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

FOR LINE NUMBER: PAGE 5 OF 280
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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. HARRY ABURROW

Mailing Address **74 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2224**

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
700.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1950

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JAMES S. ADAMSON

Mailing Address **3 EVERGREEN COURT**

City **LITTLE ROCK** State **AR** Zip Code **72227-5907**

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
09 / 18 / 2014

Transaction ID : SA11.2506

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BUNNY ADCOCK

Mailing Address **1321 OAK STREET**

City **CONWAY** State **AR** Zip Code **72034-5338**

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

Name of Employer **SELF EMPLOYED** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2259

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1200.00

**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 6 OF 280
	<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. AL ALEXANDER

Mailing Address 3612 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2333

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. 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 Y Y
07 / 12 / 2014

Transaction ID : SA11.1943

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. AL ALEXANDER

Mailing Address 3612 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2333

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. 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 Y Y
07 / 31 / 2014

Transaction ID : SA11.2099

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. AL ALEXANDER

Mailing Address 3612 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2333

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. 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 Y Y
08 / 28 / 2014

Transaction ID : SA11.2318

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

400.00

**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 7 OF 280
	<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. AL ALEXANDER

Mailing Address 3612 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2333

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. 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
 08 / 28 / 2014

Transaction ID : SA11.2319

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. AL ALEXANDER

Mailing Address 3612 FOXCROFT ROAD

City State Zip Code
LITTLE ROCK AR 72227-2333

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. 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
 09 / 30 / 2014

Transaction ID : SA11.2639

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES ALGER

Mailing Address 6 RIVER VALLEY ROAD

City State Zip Code
LITTLE ROCK AR 72227-1505

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

Name of Employer Occupation
DELTA TRUST INVESTMENTS, INC. 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
 08 / 21 / 2014

Transaction ID : SA11.2261

Amount of Each Receipt this Period
 1000.00
 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 8 OF 280
	<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. TINA ALLEY

Mailing Address **70 SOLOGNE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72223-8914**

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2609

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **22 EAST PALISADES DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72207-1904**

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

Name of Employer **SOL ALMAN COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2209

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **P.O. BOX 3684**

City **FAYETTEVILLE** State **AR** Zip Code **72702-3684**

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

Name of Employer **BASSETT MIX AND ASSOCIATES** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2360

Amount of Each Receipt this Period
250.00
 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 9 OF 280
	<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)
MRS. ELIZABETH M. ANDERSON

Mailing Address 3612 ASBURY

City State Zip Code
DALLAS TX 75205-1849

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

Name of Employer Occupation
ALSBRIDGE, INC. CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2708

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAT ANDERSON

Mailing Address 501 MAIN STREET

City State Zip Code
PINE BLUFF AR 71601-4327

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK COMMUNITY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2520

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ROBERT E. ANDERSON

Mailing Address 5116 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5412

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

Name of Employer Occupation
SELF EMPLOYED ORAL SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2650

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 10 OF 280
	<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. STEVEN M. ANTHONY

Mailing Address P.O. BOX 137

City State Zip Code
BEARDEN AR 71720-0137

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

Name of Employer Occupation
ANTHONY TIMBERLANDS, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2402

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

Mailing Address 3657 BRIARPARK DRIVE

City State Zip Code
HOUSTON TX 77042-5264

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

Name of Employer Occupation
TRITEN CORPORTATION PRESIDENT, C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2551

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOYCE BABIN

Mailing Address 5610 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-4308

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

Name of Employer Occupation
JOYCE BABIN, TRUSTEE 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
08 / 07 / 2014

Transaction ID : SA11.2151

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

3850.00

**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 11 OF 280
	<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)
MRS. DEENA BURNETT BAILEY

Mailing Address 20 ISBELL LANE

City: LITTLE ROCK State: AR Zip Code: 72223-5132

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: 3600.00

Date of Receipt: 09 / 25 / 2014

Transaction ID : SA11.2559

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. 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: 1500.00

Date of Receipt: 07 / 01 / 2014

Transaction ID : SA11.1853

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

C. 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: 1500.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.2640

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

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

2500.00

**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 12 OF 280
	<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 L. BALDERACH III

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 COMERICA BANK 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
 07 / 01 / 2014

Transaction ID : SA11.1852

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. BALDERACH III

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 COMERICA BANK 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
 07 / 31 / 2014

Transaction ID : SA11.2094

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. THOMAS E. BALDWIN

Mailing Address 21 CARIBE LANE

City HOT SPRINGS State AR Zip Code 71909-5411

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
 07 / 31 / 2014

Transaction ID : SA11.2136

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2500.00

**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 13 OF 280
	<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. CHARLES A. BANKS

Mailing Address 100 MORGAN KEEGAN DRIVE
SUITE 100

City Little Rock State AR Zip Code 72202-2214

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

Name of Employer BANKS LAW FIRM, P.L.L.C. 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
 08 / 07 / 2014

Transaction ID : SA11.2202

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JERALD M. BARNETT JR.

Mailing Address 2420 COUNTRY CLUB LANE

City Little Rock State AR Zip Code 72207-2046

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

Name of Employer EDUCATION AMERICA, INC. Occupation INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2548

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JOY BARNES

Mailing Address 1369 HIGHWAY 425 SOUTH

City HAMBURG State AR Zip Code 71646-9001

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2605

Amount of Each Receipt this Period
 250.00
 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: PAGE 14 OF 280
(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. LOWERY C. BARNES

Mailing Address 10 EAST PALISADES DRIVE

City State Zip Code
LITTLE ROCK AR 72207-1904

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

Name of Employer Occupation
ARKANSAS SPECIALTY ORTHOPAEDICS ORTHOPEDIC SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2537

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

Mailing Address 21 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5461

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL CORPORATION PRESIDENT AND CHIEF BANKING OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11.2271

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. BARRY BASKIN

Mailing Address 4800 CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5438

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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2550

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2750.00

**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 15 OF 280

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)
MRS. SARA HENDRICKS BATCHELLER
 Mailing Address 66 SOLOGNE CIRCLE
 City State Zip Code
 LITTLE ROCK AR 72223-8914
 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
 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014
Transaction ID : SA11.2164
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND BATTLE
 Mailing Address 5 CANTRELL ROAD
 City State Zip Code
 LITTLE ROCK AR 72207-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNITED PARCEL SERVICE DIVISION MANAGER
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11.2450
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MONTY BAUGH
 Mailing Address 12 CATLETT LANE
 City State Zip Code
 LITTLE ROCK AR 72211-2194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MONTY BAUGH P.L.C. ATTORNEY AT LAW
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014
Transaction ID : SA11.2005
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

700.00

**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 280
	<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. JAMES L. BAYLESS

Mailing Address **2405 ROCKMOOR AVENUE**

City **AUSTIN** State **TX** Zip Code **78703-1516**

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

Name of Employer **JAMES L. BAYLESS, JR., L.L.C.** 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
09 / 30 / 2014

Transaction ID : SA11.2707

Amount of Each Receipt this Period
1000.00

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 **585.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.1996

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. 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 **585.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2556

Amount of Each Receipt this Period
10.00

CONTRIBUTION

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

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

1510.00

**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 17 OF 280
	<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

Full Name (Last, First, Middle Initial) MS. NANCY BECK		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 5353 MONTROSE DRIVE		Transaction ID : SA11.2593
City DALLAS	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) DR. DAVID L. BECTON		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 5814 SOUTH COUNTRY CLUB		Transaction ID : SA11.2490
City LITTLE ROCK	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer U.A.M.S	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. LOUIS A. BEECHERL		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 5950 CEDAR SPRINGS ROAD SUITE 220		Transaction ID : SA11.2486
City DALLAS	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer BEECHERL COMPANIES	Occupation INVESTMENTS	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 18 OF 280
	<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

Full Name (Last, First, Middle Initial) A. DR. CHRIS BENNETT		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 2702 STONEHEDGE		Transaction ID : SA11.2527	
City HARRISON	State AR	Zip Code 72601-8617	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer RADIOLOGY ASSOCIATES OF NORTH AMER	Occupation RADIOLOGIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. MR. KENNETH BENNETT		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 4 TIMBERLAKE DRIVE		Transaction ID : SA11.2260	
City LITTLE ROCK	State AR	Zip Code 72207-1607	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer STEPHENS, INC.	Occupation INVESTMENT BANKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. MRS. MARIE BENNETT		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 2702 STONEHEDGE		Transaction ID : SA11.2528	
City HARRISON	State AR	Zip Code 72601-8617	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 280
	<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 BENTON

Mailing Address 3814 DORAL

City State Zip Code
LITTLE ROCK AR 72212-2812

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2189

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

Mailing Address 3814 DORAL

City State Zip Code
LITTLE ROCK AR 72212-2812

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11.2515

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RANDY BEST

Mailing Address 2200 ROSS AVENUE
SUITE 3800

City State Zip Code
DALLAS TX 75201-7967

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

Name of Employer Occupation
BEST ASSOCIATES 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
 07 / 31 / 2014

Transaction ID : SA11.2118

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1400.00

**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 20 OF 280
	<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. JON BIERBAUM

Mailing Address 722 PINE RIDGE DRIVE

City HAMBURG State AR Zip Code 71646-3339

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

Name of Employer BIERBAUM TIMBER, L.L.C. Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2545

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BEAU BLAIR

Mailing Address 1904 SHADOW LANE

City LITTLE ROCK State AR Zip Code 72207-2018

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

Name of Employer MCLARTY CAPITAL PARTNERS Occupation PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2682

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEE BODENHAMER

Mailing Address 108 OVERLOOK DRIVE

City LITTLE ROCK State AR Zip Code 72207-1614

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
 07 / 24 / 2014

Transaction ID : SA11.2017

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

4600.00

**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 280
	<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)
MRS. KRISTINA BOLHOUSE

Mailing Address 10 NORTHWEST COURT

City State Zip Code
LITTLE ROCK AR 72212-1514

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
07 31 2014

Transaction ID : SA11.2104

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROGER BOLHOUSE

Mailing Address 10 NORTHWEST COURT

City State Zip Code
LITTLE ROCK AR 72212-1514

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

Name of Employer Occupation
AKAL, INC. SECURITY/FEDERAL COURTHOUSE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
09 11 2014

Transaction ID : SA11.2436

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROGER BOLHOUSE

Mailing Address 10 NORTHWEST COURT

City State Zip Code
LITTLE ROCK AR 72212-1514

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

Name of Employer Occupation
AKAL, INC. SECURITY/FEDERAL COURTHOUSE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
09 30 2014

Transaction ID : SA11.2632

Amount of Each Receipt this Period
25.00
 CONTRIBUTION

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

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

325.00

**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 22 OF 280
	<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. WAYNE BOND

Mailing Address 1720 CARAWAY ROAD

City State Zip Code
JONESBORO AR 72401-5207

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK SR. VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.1882

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE BOOKER

Mailing Address 501 NORTH COOLIDGE

City State Zip Code
LITTLE ROCK AR 72205-2713

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ROLLER FUNERAL HOMES C.P.A.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2584

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY B. BORGERSEN

Mailing Address 4612 CLUB ROAD

City State Zip Code
LITTLE ROCK AR 72207-2012

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2437

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 23 OF 280
	<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. JIM BOTTIN

Mailing Address 19 SOLOGNE CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-8913

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

Name of Employer Occupation
ABC FINANCIAL C.F.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2239

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MELANIE BOUTIETTE

Mailing Address 11724 FAIRWAY DRIVE

City State Zip Code
LITTLE ROCK AR 72212-3421

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

Name of Employer Occupation
SELF EMPLOYED ARTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2363

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BENNIE BRAY

Mailing Address 8214 WESTCHESTER DRIVE
SUITE 800

City State Zip Code
DALLAS TX 75225-6114

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

Name of Employer Occupation
SPECIALITY BAKERY HOLDINGS, L.L.C. OPERATING PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2618

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 24 OF 280
	<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. RENE EDWARD BRESSINCK

Mailing Address **ONE TREETOPS LANE**
#901

City **LITTLE ROCK** State **AR** Zip Code **72202-1528**

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

Name of Employer **DERMATOLOGY GROUP OF ARKANSAS** Occupation **PHYSICIAN**

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
08 / 07 / 2014

Transaction ID : SA11.2138

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **3005 FORREST LAKE ROAD**

City **FORREST CITY** State **AR** Zip Code **72335-2542**

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

Name of Employer **JOHN D. BRIDGFORTH, P.A.** Occupation **ATTORNEY**

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
07 / 16 / 2014

Transaction ID : SA11.1946

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **4204 GREENBRIER DRIVE**

City **DALLAS** State **TX** Zip Code **75225-6637**

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 Y Y
08 / 21 / 2014

Transaction ID : SA11.2275

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 25 OF 280
	<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

Full Name (Last, First, Middle Initial) MR. BOB BROOKS		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 5 TALMONT PLACE		Transaction ID : SA11.2052
City LITTLE ROCK	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer ALPINE GROUP, INC.	Occupation EXECUTIVE VICE PRESIDENT	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) MR. BOBBY R. BROWN		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 9 MARBAIS PLACE		Transaction ID : SA11.2213
City LITTLE ROCK	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) MRS. MARY BETH BRYCE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 18338		Transaction ID : SA11.2779
City MEMPHIS	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00	

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 26 OF 280
	<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 J. BRYCE

Mailing Address 4505 OLD LAMAR AVENUE

City MEMPHIS State TN Zip Code 38118-7033

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

Name of Employer BRYCE CORPORATION Occupation CHAIRMAN AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2768

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN R. BUTLER JR.

Mailing Address 4605 POST OAK PLACE

City HOUSTON State TX Zip Code 77027-9729

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

Name of Employer J. R. BUTLER & CO. Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2694

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICK W. CALDWELL

Mailing Address 49 HICKORY HILLS CIRCLE

City LITTLE ROCK State AR Zip Code 72212-2766

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

Name of Employer FELLOWSHIP ASSOCIATES Occupation 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
 09 / 30 / 2014

Transaction ID : SA11.2626

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4600.00

**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 280
	<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 CALLAHAN

Mailing Address 5119 JOHN F. KENNEDY BOULEVARD

City	State	Zip Code
NORTH LITTLE ROCK	AR	72116-6722

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

Name of Employer	Occupation
CALLAHAN REAL ESTATE, INC.	REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2378

Amount of Each Receipt this Period
 _____ 800.00

CONTRIBUTION

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

Mailing Address 1715 NORTH SPRUCE STREET

City	State	Zip Code
LITTLE ROCK	AR	72207-5459

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
 08 / 07 / 2014

Transaction ID : SA11.2166

Amount of Each Receipt this Period
 _____ 100.00

CONTRIBUTION

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

Mailing Address 1715 NORTH SPRUCE STREET

City	State	Zip Code
LITTLE ROCK	AR	72207-5459

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
 09 / 11 / 2014

Transaction ID : SA11.2447

Amount of Each Receipt this Period
 _____ 100.00

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 28 OF 280
	<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. CRAIG D. CAMPBELL

Mailing Address P.O. BOX 34367

City State Zip Code
LITTLE ROCK AR 72203-4367

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

Name of Employer Occupation
STEPHENS GROUP INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2268

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH S. CAMPBELL

Mailing Address P.O. BOX 34367

City State Zip Code
LITTLE ROCK AR 72203-4367

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

Name of Employer Occupation
STEPHENS GROUP EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2269

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW H. CARD JR.

Mailing Address 8405 SPRING CREEK

City State Zip Code
COLLEGE STATION TX 77845-4608

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

Name of Employer Occupation
TEXAS A&M UNIVERSITY EXECUTIVE DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2728

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

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

7800.00

**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 280
	<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. CHAD H. CARLSON

Mailing Address 203 CHALAMONT LANE

City State Zip Code
LITTLE ROCK AR 72223-5502

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

Name of Employer Occupation
DELTA TRUST AND BANK FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2155

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVEN CARLSON

Mailing Address 21 RUBRA COURT

City State Zip Code
LITTLE ROCK AR 72223-9135

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

Name of Employer Occupation
RAYMOND JAMES INVESTMENT 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
07 / 31 / 2014

Transaction ID : SA11.2100

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES CARR

Mailing Address 9235 KATY FREEWAY
SUITE 200

City State Zip Code
HOUSTON TX 77024-1505

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

Name of Employer Occupation
SMITH AND CARR, P.C. 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
09 / 30 / 2014

Transaction ID : SA11.2628

Amount of Each Receipt this Period
500.00
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 30 OF 280
	<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 CARROZZA

Mailing Address 2714 ROUTH STREET

City State Zip Code
DALLAS TX 75201-1969

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

Name of Employer Occupation
CENTER CITY, INC. REAL ESTATE INVESTMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2681

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOE CARTER

Mailing Address 8818 BARRETT ROAD

City State Zip Code
ROLAND AR 72135-9284

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

Name of Employer Occupation
SYNDER ENVIRONMENTAL C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2297

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 8818 BARRETT ROAD

City State Zip Code
ROLAND AR 72135-9284

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

Name of Employer Occupation
SYNDER ENVIRONMENTAL C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2579

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2250.00

**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 280
	<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

Full Name (Last, First, Middle Initial) MR. JOE CARTER		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 8818 BARRETT ROAD		Transaction ID : SA11.2580	
City ROLAND	State AR	Zip Code 72135-9284	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00 CONTRIBUTION	
Name of Employer SYNDER ENVIRONMENTAL	Occupation C.E.O.		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2550.00		

Full Name (Last, First, Middle Initial) COLONEL JAMES E. CASE		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 121 MOHAWK DRIVE		Transaction ID : SA11.2046	
City MAUMELLE	State AR	Zip Code 72113-5860	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) COLONEL JAMES E. CASE		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 121 MOHAWK DRIVE		Transaction ID : SA11.2286	
City MAUMELLE	State AR	Zip Code 72113-5860	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 280
	<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. MARTY DALE CASTEEL

Mailing Address **4620 STEVENS DRIVE**

City **PINE BLUFF** State **AR** Zip Code **71603-7323**

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

Name of Employer **SIMMONS FIRST NATIONAL BANK** Occupation **CHAIRMAN AND CHIEF EXECUTIVE OFFICE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2272

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. STEVEN L. CATHY

Mailing Address **6 CHENAL WOODS #631**

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

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

Name of Employer **SELF EMPLOYED** Occupation **NEUROLOGICAL SURGEON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2364

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND K. CHAFIN

Mailing Address **3060 WINDCREST DRIVE**

City **CONWAY** State **AR** Zip Code **72034-3484**

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
07 / 24 / 2014

Transaction ID : SA11.2035

Amount of Each Receipt this Period
250.00
 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 33 OF 280
	<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. EDDIE CHOATE

Mailing Address **361 PIPPINPOST DRIVE**

City **CONWAY** State **AR** Zip Code **72034-5526**

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

Name of Employer **DELTA DENTAL OF ARKANSAS** Occupation **PRESIDENT & C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2404

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL CLEVELAND

Mailing Address **8080 NORTH CENTRAL EXPRESSWAY SUITE 210**

City **DALLAS** State **TX** Zip Code **75206-1818**

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

Name of Employer **RENAISSANCE CAPITAL GROUP, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2161

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

Mailing Address **9 RIVER RIDGE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72227-1517**

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

Name of Employer **STEPHENS, INC.** Occupation **SR. VICE PRESIDENT, PRODUCER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2780

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

4600.00

**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 280
	<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. HOWARD COCKRILL JR.

Mailing Address 50 RIVER RIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72227-1518

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
09 / 11 / 2014

Transaction ID : SA11.2423

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DARYL E. COKER

Mailing Address 35 BRETAGNE CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-9115

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

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2504

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 315 ROCK STREET
#1901

City State Zip Code
LITTLE ROCK AR 72202-5506

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
08 / 07 / 2014

Transaction ID : SA11.2162

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1450.00

**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 280
	<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. CHARLIE CONKLIN

Mailing Address **21 SOMERSETT COURT**

City **ROLAND** State **AR** Zip Code **72135-9039**

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

Name of Employer **ARKANSAS KIDS READ** Occupation **EXECUTIVE 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
08 / 28 / 2014

Transaction ID : SA11.2356

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BERRY COX

Mailing Address **2100 MCKINNEY AVENUE
SUITE 1700**

City **DALLAS** State **TX** Zip Code **75201-6975**

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

Name of Employer **BERRY R. COX, INC.** Occupation **PRIVATE INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2541

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CORY COX

Mailing Address **112 CORONDELET LANE**

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

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

Name of Employer **STATE OF ARKANSAS** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **269.73**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2477

Amount of Each Receipt this Period
269.73
 CONTRIBUTION

IN-KIND FOOD AND BEVERAGES FOR FUNDRAISER

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

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

1019.73

**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 280
	<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. FRANK COX

Mailing Address 5400 CHENONCEAU BOULEVARD
#1010

City State Zip Code
LITTLE ROCK AR 72223-4758

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

Name of Employer Occupation
HENDRIX COLLEGE MARKETING EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2330

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. FRANK COX

Mailing Address 5400 CHENONCEAU BOULEVARD
#1010

City State Zip Code
LITTLE ROCK AR 72223-4758

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

Name of Employer Occupation
HENDRIX COLLEGE MARKETING EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2678

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JEANNE TOWER COX

Mailing Address 2100 MCKINNEY AVENUE
SUITE 100

City State Zip Code
DALLAS TX 75201-6906

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
09 / 25 / 2014

Transaction ID : SA11.2560

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 280
	<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. JOHN CRADDOCK

Mailing Address 3024 DEL MONTE DRIVE

City HOUSTON State TX Zip Code 77019-3214

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

Name of Employer ROSEWOOD ENT, L.L.P. 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
 09 / 25 / 2014

Transaction ID : SA11.2552

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHAD CRANK

Mailing Address 2719 NORTH TAYLOR STREET

City LITTLE ROCK State AR Zip Code 72207-2834

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

Name of Employer STEPHENS, INC. 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
 09 / 25 / 2014

Transaction ID : SA11.2570

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEVIN A. CRASS

Mailing Address 4521 COUNTRY CLUB BOULEVARD

City LITTLE ROCK State AR Zip Code 72207-2033

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

Name of Employer FRIDAY, ELDRIDGE, AND CLARK Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2542

Amount of Each Receipt this Period
 250.00

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 38 OF 280
	<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. LEE CRESS

Mailing Address 38 RIVER RIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72227-1518

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
09 / 30 / 2014

Transaction ID : SA11.2687

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 28417 JESS MORGAN

City State Zip Code
ROLAND AR 72135-9008

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

Name of Employer Occupation
RIGGS CAT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1369.49

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2001

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. NICOLE CURRIE

Mailing Address 2308 NORTH COLUMBUS STREET

City State Zip Code
ARLINGTON VA 22207-2525

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

Name of Employer Occupation
AMGEN DIRECTOR, GOVERNMENT AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2637

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 39 OF 280
	<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 E. DALE

Mailing Address 90 CLAUD HOTTINGER ROAD

City DOVER State AR Zip Code 72837-8060

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

Name of Employer STATE OF ARKANSAS Occupation LEGISLATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11.2243

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DAVID DAVILA

Mailing Address 240 BUCKLAND CIRCLE

City LITTLE ROCK State AR Zip Code 72223-4534

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

Name of Employer BAPTIST HEALTH 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
 09 / 30 / 2014

Transaction ID : SA11.2652

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDY DAVIS

Mailing Address 7006 LUCEA COURT

City LITTLE ROCK State AR Zip Code 72210-4146

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

Name of Employer NEW WATER SYSTEMS Occupation SALES ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2333

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 40 OF 280
	<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. CHARLES HAMILTON DAVISON

Mailing Address 33 HAZARD AVENUE

City State Zip Code
PROVIDENCE RI 02906-3325

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

Name of Employer Occupation
AMERICAN CATALOG MAILERS ASSOCIATIC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2710

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. CHARLES M. DAVIS

Mailing Address 132 FALATA CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-5089

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
 09 / 30 / 2014

Transaction ID : SA11.2648

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BETTY C. DICKEY

Mailing Address 132 FALATA CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-5089

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
 09 / 25 / 2014

Transaction ID : SA11.2606

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

600.00

**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 280
	<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. EDWARD DICKEY

Mailing Address **P.O. BOX 17674**

City **LITTLE ROCK** State **AR** Zip Code **72222-7674**

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

Name of Employer **LIGHTHOUSE INVESTMENTS, LLC** Occupation **FINANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2544

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. PEGGY DICKINSON

Mailing Address **6 WEST PALISADES DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72207-1854**

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 **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2892

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

Mailing Address **2115 NORTH SPRUCE STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-4729**

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

Name of Employer **MCGEORGE CONTRACTING** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11.1864

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

2350.00

**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 280
	<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)
MRS. TABIETHA DILLARD

Mailing Address 53 ROBINWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2238

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
400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1978

Amount of Each Receipt this Period
400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JOYCE DILLINGHAM

Mailing Address 4916 EAST CRESTWOOD

City State Zip Code
LITTLE ROCK AR 72207-5408

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
1750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2101

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JOYCE DILLINGHAM

Mailing Address 4916 EAST CRESTWOOD

City State Zip Code
LITTLE ROCK AR 72207-5408

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
1750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2264

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1650.00

**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 280
	<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. RAY DILLON

Mailing Address **57 SOLOGNE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72223-8913**

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

Name of Employer **DELTIC TIMBER CORP.** Occupation **PRESIDENT AND C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1951

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CANDACE DIXON

Mailing Address **P.O. BOX 547**

City **JOHNSON** State **AR** Zip Code **72741-0547**

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

Name of Employer **CUMULUS** Occupation **SENIOR EXECUTIVE SALES REPRESENTAT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2705

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES K. DOBBS III

Mailing Address **P.O. BOX 241750**

City **MEMPHIS** State **TN** Zip Code **38124-1750**

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

Name of Employer **DOBBS BROTHER MANAGEMENT** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2583

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

5100.00

**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 44 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. 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
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11.2634

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. 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
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11.2704

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY DOUGLAS

Mailing Address ONE WOOD PLACE

City State Zip Code
 TEXARKANA AR 71854-3333

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
 08 14 2014

Transaction ID : SA11.2225

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1200.00

**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 280
	<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)
MRS. HELEN R. DUBOIS

Mailing Address 1545 35TH STREET NW

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 **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2675

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address 3190 MAJESTIC CIRCLE

City CONWAY State AR Zip Code 72034-9670

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 **380.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2645

Amount of Each Receipt this Period
130.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALAN H. DUNCAN

Mailing Address 25 ST. ANDREW DRIVE

City LITTLE ROCK State AR Zip Code 72212-2908

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

Name of Employer MOUNTAIRE FARMS Occupation EXECUTIVE/C.P.A.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11.2248

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1380.00

**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 280
	<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. TED DUNCAN

Mailing Address **29 MASTERS PLACE DRIVE**

City **MAUMELLE** State **AR** Zip Code **72113-7021**

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

Name of Employer **FROST, P.L.L.C.** Occupation **C.P.A. /A.B.V., C.V.A.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2507

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE H. DUNKLIN JR.

Mailing Address **P.O. BOX 586**

City **DEWITT** State **AR** Zip Code **72042-0586**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2498

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. STEVEN A. DUNNAGAN

Mailing Address **150 HICKORY CREEK CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72212-2511**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2146

Amount of Each Receipt this Period
500.00

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 47 OF 280
	<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. STEVEN A. DUNNAGAN

Mailing Address 150 HICKORY CREEK CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2511

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES, P.A. PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2310

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DUWARD DUPRE

Mailing Address 3929 DOVE CREEK LANE

City State Zip Code
PLANO TX 75093-7542

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
 09 / 30 / 2014

Transaction ID : SA11.2709

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MERRITT DYKE

Mailing Address 420 ARGONNE DRIVE, N.W.

City State Zip Code
ATLANTA GA 30305-2841

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

Name of Employer Occupation
DYKE INDUSTRIES CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2662

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

2250.00

**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 280	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. FRED EASON

Mailing Address 1920 MAIN STREET
SUITE 100

City NORTH LITTLE ROCK State AR Zip Code 72114-2876

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

Name of Employer DELTA-TRUST INVESTMENTS Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2384

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES C. EAST

Mailing Address 1 INFORMATION WAY
SUITE 202

City LITTLE ROCK State AR Zip Code 72202-2290

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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2480

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GREGORY L. EBEL

Mailing Address 5400 WESTHEIMER COURT

City HOUSTON State TX Zip Code 77056-5353

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

Name of Employer SPECTRA ENERGY CORPORATION Occupation CHAIRMAN, 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
09 / 30 / 2014

Transaction ID : SA11.2696

Amount of Each Receipt this Period
500.00
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 49 OF 280
	<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. BRAD EICHLER

Mailing Address 4901 EAST CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5407

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

Name of Employer Occupation
STEPHENS, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2281

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BYRON M. EISEMAN

Mailing Address 64 RIVERIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72227-1518

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

Name of Employer Occupation
FRIDAY LAW FIRM 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
07 / 31 / 2014

Transaction ID : SA11.2096

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LLOYD ELLIOTT

Mailing Address P.O. BOX 1039

City State Zip Code
BENTON AR 72018-1039

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

Name of Employer Occupation
ELLIOTT ELECTRICAL, INC. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1994

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

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

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

5000.00

**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 280
	<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. MILTON D. ELLIOTT

Mailing Address **1 RANDAL COVE**

City **MAUMELLE** State **AR** Zip Code **72113-6421**

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

Name of Employer **DILLARD'S, INC.** Occupation **DIRECTOR, GOVERNMENTAL AFFAIRS**

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
09 / 11 / 2014

Transaction ID : SA11.2465

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEITH EMIS

Mailing Address **423 EAST 3RD #305**

City **LITTLE ROCK** State **AR** Zip Code **72201-1662**

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

Name of Employer **DIAMOND STATE** Occupation **POLITICAL CONSULTING**

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
09 / 11 / 2014

Transaction ID : SA11.2474

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES J. ENDERLIN

Mailing Address **1612 MOUNTAIN DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-5837**

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

Name of Employer **OAK FOREST CLEANERS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2567

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 51 OF 280
	<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)
MRS. PATRICIA ENDERLIN

Mailing Address 1217 FAIR PARK BOULEVARD

City State Zip Code
LITTLE ROCK AR 72204-2711

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

Name of Employer Occupation
OAK FOREST CLEANERS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2502

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SENATOR JANE ENGLISH

Mailing Address 3 GREAT OAK COURT

City State Zip Code
NORTH LITTLE ROCK AR 72116-5167

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
800.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2006

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 805 HILLCREST STREET

City State Zip Code
FORT WORTH TX 76107-1519

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2210

Amount of Each Receipt this Period
500.00
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 52 OF 280
	<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)
MRS. SALLY HALL EZELL

Mailing Address 10034 OVERBROOK LANE

City HOUSTON State TX Zip Code 77042-3104

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

Name of Employer SELF EMPLOYED Occupation ORGANIZER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2835.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2535

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 2415 WEST ALABAMA #220

City HOUSTON State TX Zip Code 77098-2263

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

Name of Employer G.E.C. L.P. Occupation INVESTOR

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
 09 / 25 / 2014

Transaction ID : SA11.2539

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 30 MARCELLA DRIVE

City LITTLE ROCK State AR Zip Code 72223-9172

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

Name of Employer SIMMONS FIRST NATIONAL CORPORATION Occupation SR. EXECUTIVE V.P., C.F.O. AND TREASUR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11.1964

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

1700.00

**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 280
	<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 FEHLMAN

Mailing Address **30 MARCELLA DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9172**

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

Name of Employer **SIMMONS FIRST NATIONAL CORPORATION** Occupation **SR. EXECUTIVE V.P., C.F.O. AND TREASUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2726

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CURTIS O. FERGUSON

Mailing Address **624 RIVER STREET**

City **BENTON** State **AR** Zip Code **72015-4110**

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

Name of Employer **FERGUSON FURNITURE COMPANY** Occupation **BUSINESS MANAGER**

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
07 / 31 / 2014

Transaction ID : SA11.2087

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICK FERGUSON

Mailing Address **P.O. BOX 23670**

City **LITTLE ROCK** State **AR** Zip Code **72221-3670**

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

Name of Employer **RICK FERGUSON CUSTOM HOMES OF ARK/** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2642

Amount of Each Receipt this Period
1600.00
 CONTRIBUTION

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

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

2850.00

**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 54 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

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

Mailing Address **4828 HILLCREST DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72205-1914**

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

Name of Employer **THE BAILEY CORPORATION** Occupation **REAL ESTATE 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 Y Y
07 / 31 / 2014

Transaction ID : SA11.2115

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS M. FERSTL

Mailing Address **4828 HILLCREST DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72205-1914**

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

Name of Employer **THE BAILEY CORPORATION** Occupation **REAL ESTATE 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 Y Y
09 / 30 / 2014

Transaction ID : SA11.2653

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. TERRY FIDDLER

Mailing Address **3010 COLLINS DRIVE**

City **CONWAY** State **AR** Zip Code **72034-8426**

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

Name of Employer **FIDDLER AND FULMER DENTISTRY** Occupation **DENTIST**

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
09 / 30 / 2014

Transaction ID : SA11.2660

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1300.00

**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 280
	<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. CURTIS FINCH JR.

Mailing Address 1221 GULFSHORES BLVD. N
#601

City State Zip Code
NAPLES FL 34102-

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
350.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.1871

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DICKSON L. FLAKE

Mailing Address 17 ST. JOHN'S PLACE

City State Zip Code
LITTLE ROCK AR 72207-3700

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

Name of Employer Occupation
DICKSON FLAKE PARTNERS PRESIDENT COMMERCIAL REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2143

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DICKSON L. FLAKE

Mailing Address 17 ST. JOHN'S PLACE

City State Zip Code
LITTLE ROCK AR 72207-3700

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

Name of Employer Occupation
DICKSON FLAKE PARTNERS PRESIDENT COMMERCIAL REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2683

Amount of Each Receipt this Period
1000.00
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: PAGE 56 OF 280
(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)
MS. MARGARET FLESHER

Mailing Address 10 EAST 70TH
#5A

City State Zip Code
NEW YORK NY 10021-5246

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
 08 07 2014

Transaction ID : SA11.2194

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JUDY FLETCHER

Mailing Address 808 SILVERWOOD TRAIL

City State Zip Code
NORTH LITTLE ROCK AR 72116-5132

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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 25 2014

Transaction ID : SA11.2604

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOMINIC FLIS

Mailing Address 28 COURTS DRIVE

City State Zip Code
LITTLE ROCK AR 72223-9021

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

Name of Employer Occupation
FLIS MANAGEMENT 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
 09 04 2014

Transaction ID : SA11.2395

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

5100.00

**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 280
	<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. PETER FLOOD

Mailing Address P.O. BOX 229

City State Zip Code
SUN VALLEY ID 83353-0229

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2444

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ELMER L. FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City State Zip Code
MAUMELLE AR 72113-7402

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2421

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MOZELLA DEES FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City State Zip Code
MAUMELLE AR 72113-7402

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11.1862

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 58 OF 280
	<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)
MRS. MOZELLA DEES FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City MAUMELLE State AR Zip Code 72113-7402

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
3450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2145

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MOZELLA DEES FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City MAUMELLE State AR Zip Code 72113-7402

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
3450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2410

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MOZELLA DEES FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City MAUMELLE State AR Zip Code 72113-7402

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
3450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2422

Amount of Each Receipt this Period
 250.00
 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 59 OF 280
	<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)
MRS. MOZELLA DEES FLUCHT

Mailing Address 136 CHEROKEE DRIVE

City MAUMELLE State AR Zip Code 72113-7402

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
3450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2721

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RANDALL M. FORT

Mailing Address 2223 NORTH ORIC

City ARLINGTON State VA Zip Code 22209-

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

Name of Employer RAYTHEON COMPANY Occupation DIRECTOR OF PROGRAM SECURITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2435

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 36 ISBELL LANE

City LITTLE ROCK State AR Zip Code 72223-5132

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

Name of Employer RAYMOND JAMES AND ASSOCIATES, INC. 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
 08 / 28 / 2014

Transaction ID : SA11.2316

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 60 OF 280
	<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. THOMAS FOTI

Mailing Address 5018 COUNTRY CLUB BOULEVARD

City State Zip Code
LITTLE ROCK AR 72207-4724

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

Name of Employer Occupation
STATE OF ARKANSAS BIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2432

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFERY FOX

Mailing Address 5300 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5308

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

Name of Employer Occupation
CIRCUMFERENCE GROUP FOUNDER AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2670

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MELANIE FOX

Mailing Address 5300 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5308

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
09 / 30 / 2014

Transaction ID : SA11.2669

Amount of Each Receipt this Period
2600.00
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 61 OF 280
	<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 FRENCH

Mailing Address **1 FRENCH HILL ROAD**

City **MORRILTON** State **AR** Zip Code **72110-9255**

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

Name of Employer **MOBLEY CONTRACTORS, INC.** Occupation **CONSTRUCTION VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2407

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RON FULLER

Mailing Address **5 BRAEBURN COURT**

City **LITTLE ROCK** State **AR** Zip Code **72212-2801**

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

Name of Employer **RON FULLER ENTERPRISES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2328

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT GAILLE

Mailing Address **1301 MCKINNEY SUITE 2800**

City **HOUSTON** State **TX** Zip Code **77010-3079**

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

Name of Employer **ZAZA ENERGY CORPORATION** 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
09 / 25 / 2014

Transaction ID : SA11.2615

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 62 OF 280
	<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. JEFFERY GARDNER

Mailing Address 4001 RODNEY PARHAM ROAD

City State Zip Code
LITTLE ROCK AR 72212-2459

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

Name of Employer Occupation
WINDSTREAM COMMUNICATIONS C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2107

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DUMAS GARRETT

Mailing Address 4508 SOUTH LOOKOUT STREET

City State Zip Code
LITTLE ROCK AR 72205-1939

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

Name of Employer Occupation
DEWAFELBAKKERS, L.L.C. EXECUTIVE MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2573

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERNEST GILBY

Mailing Address 1 SHACKLEFORD WEST BOULEVARD

City State Zip Code
LITTLE ROCK AR 72211-3714

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

Name of Employer Occupation
PARKER LEXUS, INC. GENERAL 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
08 / 28 / 2014

Transaction ID : SA11.2341

Amount of Each Receipt this Period
300.00
CONTRIBUTION

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

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

2550.00

**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 280
	<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. JOE GIROIR

Mailing Address 1250 SAWMILL ROAD

City State Zip Code
QUITMAN AR 72131-9522

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

Name of Employer Occupation
THE TWO JJ RANCH OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.1876

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ANNE B. GLOVER

Mailing Address 6 HERITAGE PARK CIRCLE

City State Zip Code
NORTH LITTLE ROCK AR 72116-8529

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

Name of Employer Occupation
GLOVER'S TRUCK PARTS AND EQUIPMENT 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
09 / 04 / 2014

Transaction ID : SA11.2385

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDDIE GLOVER

Mailing Address 4220 BAY HILL DRIVE

City State Zip Code
CONWAY AR 72034-8195

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

Name of Employer Occupation
US COMPOUNDING PHARMACY 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
08 / 14 / 2014

Transaction ID : SA11.2224

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2250.00

**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 64 OF 280
	<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. STEVE GOODE

Mailing Address 1304 HIGHWAY 64

City: VILONIA State: AR Zip Code: 72173-9540

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

Name of Employer: GOODE FOODS L.L.C. Occupation: OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 09 / 25 / 2014

Transaction ID : SA11.2880

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANICE H. GOODWIN

Mailing Address 3500 CEDAR HILL ROAD #3 NORTH

City: LITTLE ROCK State: AR Zip Code: 72202-1914

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: 3250.00

Date of Receipt: 08 / 28 / 2014

Transaction ID : SA11.2313

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address 23 GREATHOUSE BEND

City: LITTLE ROCK State: AR Zip Code: 72207-1608

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

Name of Employer: SELF EMPLOYED CONTRACTOR Occupation: PLUMBING CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 04 / 2014

Transaction ID : SA11.2401

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 280
	<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. GREER GRACE

Mailing Address 5612 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-4308

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
07 / 10 / 2014

Transaction ID : SA11.1875

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAROLD D. GRANT

Mailing Address 427 LITTLE BROOK ROAD

City State Zip Code
BERWYN PA 19312-1638

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

Name of Employer Occupation
SELF EMPLOYED BUSINESS 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
08 / 28 / 2014

Transaction ID : SA11.2325

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT R. GRANUCCI

Mailing Address 100 BROADWAY STREET

City State Zip Code
SAN FRANCISCO CA 94111-1430

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

Name of Employer Occupation
ROBERT GRANUCCI LAW OFFICES 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
07 / 17 / 2014

Transaction ID : SA11.1969

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 66 OF 280
	<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. STEVEN W. GRAY

Mailing Address 15800 12TH STREET

City PARON State AR Zip Code 72122-9509

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

Name of Employer U.A.M.S. Occupation ANALYST/PROJECT 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
 09 / 04 / 2014

Transaction ID : SA11.2405

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CURT GREEN

Mailing Address 3416 JACK CULLEN DRIVE

City TEXARKANA State AR Zip Code 71854-2548

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

Name of Employer CURT GREEN AND COMPANY Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1438.04

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2571

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 1839 COLLEGE AVENUE

City CONWAY State AR Zip Code 72034-6301

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

Name of Employer PARKER AUTO GROUP Occupation SERVICE AND PARTS 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
 08 / 28 / 2014

Transaction ID : SA11.2340

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 67 OF 280
	<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. FRANK J. GUYOL III

Mailing Address **9707 CONWAY ROAD**

City **SAINT LOUIS** State **MO** Zip Code **63124-1668**

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 **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2434

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

Mailing Address **1 GLENLEIGH DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2207**

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 **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1948

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DON FOSTER HAMILTON

Mailing Address **1 GLENLEIGH DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2207**

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 **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2309

Amount of Each Receipt this Period
250.00
 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: (check only one)	PAGE 68 OF 280
	<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. BILL HANNAH

Mailing Address 1510 WILLOW CREEK COVE

City CONWAY State AR Zip Code 72034-7565

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

Name of Employer NABHOLZ CONSTRUCTION Occupation CHAIRMAN OF THE BOARD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2555

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELLEN HARDIN

Mailing Address 13 VALLEY CLUB CIRCLE

City LITTLE ROCK State AR Zip Code 72212-3436

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 **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1963

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address 3330 NICKLAUS

City CONWAY State AR Zip Code 72034-7300

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

Name of Employer SOUTHWESTERN ENERGY COMPANY Occupation BUSINESS SOLUTIONS SUPERINTENDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2716

Amount of Each Receipt this Period
500.00
 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 69 OF 280
	<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. LOYD HARRIS

Mailing Address P.O. BOX 784

City JACKSONVILLE State AR Zip Code 72078-0784

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
 07 / 31 / 2014

Transaction ID : SA11.2114

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 1400

City CROSSVILLE State TN Zip Code 38557-1400

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

Name of Employer PLATEAU PROPERTIES, INC. Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2561

Amount of Each Receipt this Period
 10.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. RUSSELL HARRIS

Mailing Address 9 VERSAILLES COURT

City LITTLE ROCK State AR Zip Code 72211-5500

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

Name of Employer S.R.A.C. 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
 08 / 07 / 2014

Transaction ID : SA11.2188

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

760.00

**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 280
	<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 A. HARRISON

Mailing Address 1501 WESTPART DRIVE
SUITE 9

City LITTLE ROCK State AR Zip Code 72204-2457

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

Name of Employer HARRISON ENERGY PARTNERS 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 Y Y
 09 / 30 / 2014

Transaction ID : SA11.2672

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 35 TALLYHO LANE

City LITTLE ROCK State AR Zip Code 72227-2443

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

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

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
 08 / 07 / 2014

Transaction ID : SA11.2153

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 73 VALLEY CLUB CIRCLE

City LITTLE ROCK State AR Zip Code 72212-3445

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

Name of Employer MCLARTY COMPANY Occupation CHIEF FINANCIAL OFFICER

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
 09 / 30 / 2014

Transaction ID : SA11.2717

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: PAGE 71 OF 280
(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. MARION HARTZ

Mailing Address 1804 SOUTH PRAIRIE STREET

City State Zip Code
STUTTGART AR 72160-5838

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 07 2014

Transaction ID : SA11.2180

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. NICOLE HARTZ

Mailing Address 6 CLEVELAND CIRCLE

City State Zip Code
LITTLE ROCK AR 72207-6305

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

Name of Employer Occupation
ARKANSAS STATE COURT OF APPEALS ATTORNEY AT LAW AND LEGAL ASSISTANT

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
 08 07 2014

Transaction ID : SA11.2178

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GREGORY L. HATCHER

Mailing Address P.O. BOX 3505

City State Zip Code
LITTLE ROCK AR 72203-3505

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

Name of Employer Occupation
HATCHER AGENCY INSURANCE SALES

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
 08 14 2014

Transaction ID : SA11.2216

Amount of Each Receipt this Period
 250.00
 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 72 OF 280
	<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. JAMES E. HATHAWAY JR.

Mailing Address 1821 CANAL POINTE

City State Zip Code
LITTLE ROCK AR 72202-1414

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

Name of Employer Occupation
COLDWELL BANKER COMMERCIAL/HATHAW COMMERCIAL/REAL ESTATE/BANKER/COU

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2417

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARLON DARRELL HAYNES

Mailing Address 7 STONEBRIDGE CIRCLE #725

City State Zip Code
LITTLE ROCK AR 72223-4561

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

Name of Employer Occupation
M.H.G.E., INC. 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
09 / 25 / 2014

Transaction ID : SA11.2608

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOE T. HAYS

Mailing Address 8 MENDEN LANE

City State Zip Code
LITTLE ROCK AR 72223-9287

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

Name of Employer Occupation
OLD MAIN ADVISORS, INC. PRIVATE EQUITY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2499

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

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

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

3850.00

**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 280
	<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)
MRS. PATRICIA HAYS

Mailing Address **8 MENDEN LANE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9287**

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

Name of Employer **ARKANSAS SPECIAL EDUATION LAW FIRM** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2524

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BART HESTER

Mailing Address **105 LILLARD LANE**

City **CAVE SPRINGS** State **AR** Zip Code **72718-7160**

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

Name of Employer **PINNACLE REALTY GROUP** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2376

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FRANK D. HICKINGBOTHAM

Mailing Address **11300 NORTH RODNEY PARHAM ROAD
SUITE 300**

City **LITTLE ROCK** State **AR** Zip Code **72212-4105**

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

Name of Employer **HICKINGBOTHAM INVESTMENTS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2497

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

3850.00

**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 74 OF 280
	<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. JIMMY B. HICKS

Mailing Address 4024 SOUTH LINDEN STREET

City State Zip Code
PINE BLUFF AR 71603-7146

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL CORPORATION MANAGER, CORP. RESPONSIBILITY AND SI

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2283

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 4245 JAMESBOROUGH PLACE

City State Zip Code
NASHVILLE TN 37215-3614

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

Name of Employer Occupation
EDGE GROUP, INC. CONSULTING ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2501

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 2415 NORTH JACKSON STREET

City State Zip Code
LITTLE ROCK AR 72207-3715

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
5200.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2208

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

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

3350.00

**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 280
	<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. THOMAS L. HODGES

Mailing Address 2322 BEECHWOOD

City State Zip Code
LITTLE ROCK AR 72207-2026

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

Name of Employer Occupation
THE HODGES GROUP REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2263

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 2116 DEL MONTE DRIVE

City State Zip Code
HOUSTON TX 77019-3535

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

Name of Employer Occupation
THE STERLING GROUP PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2095

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDITH HOLIDAY

Mailing Address 3239 38TH STREET NW

City State Zip Code
WASHINGTON DC 20016-3728

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
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2495

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

3850.00

**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 280
	<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. NED S. HOLMES

Mailing Address 55 WAUGH DRIVE
SUITE 111

City HOUSTON State TX Zip Code 77007-5800

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

Name of Employer NED S. HOLMES INVESTMENTS, INC. Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2619

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS HOLMES

Mailing Address 6511 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72207-4218

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
 08 / 07 / 2014

Transaction ID : SA11.2179

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BARBARA ROGERS HOOVER

Mailing Address 5 EDGEHILL ROAD

City LITTLE ROCK State AR Zip Code 72207-5443

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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2149

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 77 OF 280	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	12	13a	13b	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)
REP. DOUGLAS HOUSE

Mailing Address **8923 BRIDGE CREEK ROAD**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72120-9469**

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

Name of Employer **HILGER FARMS, INC.** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2416

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRANDON HUFFMAN

Mailing Address **1210 ALDERSGATE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72205-6606**

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

Name of Employer **HUFFMAN DRYWALL COMPANY** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2274

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRUCE W. HUNT

Mailing Address **3820 POTOMAC AVENUE**

City **DALLAS** State **TX** Zip Code **75205-2115**

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

Name of Employer **PETRO-HUNT, L.L.C.** 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
09 / 25 / 2014

Transaction ID : SA11.2622

Amount of Each Receipt this Period
500.00
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 78 OF 280
	<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. HOWARD C. HURST

Mailing Address P.O. BOX 7329

City: LITTLE ROCK State: AR Zip Code: 72217-7329

FEC ID number of contributing federal political committee: C

Name of Employer: TIPTON & HURST Occupation: C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 08 / 21 / 2014

Transaction ID : SA11.2247

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH HURST

Mailing Address 1921 NORTH SPRUCE STREET

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

FEC ID number of contributing federal political committee: C

Name of Employer: FRIDAY, ELDRIDGE, AND CLARK Occupation: ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 21 / 2014

Transaction ID : SA11.2299

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HERMANN IVESTER

Mailing Address 5 LESLIE CIRCLE

City: LITTLE ROCK State: AR Zip Code: 72205-2529

FEC ID number of contributing federal political committee: C

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 17 / 2014

Transaction ID : SA11.1975

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

2500.00

**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 280
	<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. DONALD T. JACK JR.

Mailing Address 2800 CANTRELL ROAD
SUITE 500

City Little Rock State AR Zip Code 72202-2043

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

Name of Employer JACK NELSON JONES AND BRYANT Occupation ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2543

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DORSEY W. JACKSON

Mailing Address 2406 NORTH TAYLOR STREET

City Little Rock State AR Zip Code 72207-3625

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
 09 / 11 / 2014

Transaction ID : SA11.2431

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 211 NORTH WASHINGTON AVE.
SUITE 200

City EL DORADO State AR Zip Code 71730-5662

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11.2279

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 80 OF 280
	<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 H. JANES III

Mailing Address 1704 NORTH PALM STREET

City State Zip Code
LITTLE ROCK AR 72207-5456

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STEPHENS, INC. INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2014

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT H. JANES III

Mailing Address 1704 NORTH PALM STREET

City State Zip Code
LITTLE ROCK AR 72207-5456

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STEPHENS, INC. INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2159

Amount of Each Receipt this Period

CONTRIBUTION

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

Mailing Address 2 TUSCANY COVE

City State Zip Code
LITTLE ROCK AR 72223-5941

FEC ID number of contributing federal political committee.

Name of Employer Occupation
GLOBAL MTG, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2487

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 81 OF 280
	<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. JOSHUA JENKINS

Mailing Address P.O. BOX 23295

City State Zip Code
LITTLE ROCK AR 72221-3295

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

Name of Employer Occupation
PARKER CADILLAC, INC. GENERAL SALES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2339

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHRIS JOHNSON

Mailing Address 2925 OVERBROOK CIRCLE

City State Zip Code
NORTH LITTLE ROCK AR 72116-7654

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

Name of Employer Occupation
DILLARD'S, INC. VICE PRESIDENT REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2693

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MATTHEW JONES

Mailing Address 36 PEBBLE BEACH DRIVE

City State Zip Code
LITTLE ROCK AR 72212-2805

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

Name of Employer Occupation
M.R. JONES INVESTMENTS, L.L.C. INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2881

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 82 OF 280
	<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. STEVEN JONSSON

Mailing Address 2400 COTTONDALE LANE

City State Zip Code
LITTLE ROCK AR 72202-2020

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

Name of Employer Occupation
SIGNAL MEDIA EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2375

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALEXANDER JORDAN

Mailing Address 5 RIDGEVIEW COURT

City State Zip Code
LITTLE ROCK AR 72227-2340

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11.2212

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ALISON KARRH

Mailing Address 116 HICKORY CREEK CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2510

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
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2553

Amount of Each Receipt this Period
 2600.00
 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 280
	<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. JAMES A. KARRH

Mailing Address 116 HICKORY CREEK CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2510

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

Name of Employer Occupation
KARRH AND ASSOCIATES C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2607

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RUSSELL T. KEENE

Mailing Address 1510 SAN ANTONIO

City State Zip Code
AUSTIN TX 78701-1613

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

Name of Employer Occupation
THE MONUMENT GROUP PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2720

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address P.O. BOX 23602

City State Zip Code
LITTLE ROCK AR 72221-3602

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

Name of Employer Occupation
KEET MANAGEMENT COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2500

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

3350.00

**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 280
	<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. ALLEN KERR

Mailing Address 1429 MERRILL DRIVE

City State Zip Code
LITTLE ROCK AR 72211-1819

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

Name of Employer Occupation
ALLEN KERR INSURANCE 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
08 / 28 / 2014

Transaction ID : SA11.2334

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 1 TRAFALGAR COVE

City State Zip Code
LITTLE ROCK AR 72210-3706

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
09 / 11 / 2014

Transaction ID : SA11.2470

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEROME F. KINNEY IV

Mailing Address P.O. BOX 415

City State Zip Code
OXFORD MD 21654-0415

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

Name of Employer Occupation
OXFORD CONSULTING, 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
09 / 18 / 2014

Transaction ID : SA11.2505

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2750.00

**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 280
	<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. WHITFIELD L. KNAPPLE

Mailing Address 4703 CRESTWOOD DRIVE

City: LITTLE ROCK State: AR Zip Code: 72207-5435

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: 4850.00

Date of Receipt: 07 / 24 / 2014

Transaction ID : SA11.2008

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. WHITFIELD L. KNAPPLE

Mailing Address 4703 CRESTWOOD DRIVE

City: LITTLE ROCK State: AR Zip Code: 72207-5435

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: 4850.00

Date of Receipt: 08 / 28 / 2014

Transaction ID : SA11.2317

Amount of Each Receipt this Period: 600.00

CONTRIBUTION

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

Mailing Address 3 WEST PALISADES

City: LITTLE ROCK State: AR Zip Code: 72207-1853

FEC ID number of contributing federal political committee: C

Name of Employer: STEPHENS, INC. Occupation: ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 07 / 10 / 2014

Transaction ID : SA11.1870

Amount of Each Receipt this Period: 1000.00

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 86 OF 280
	<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 A. KNIGHT

Mailing Address **3 WEST PALISADES**

City **LITTLE ROCK** State **AR** Zip Code **72207-1853**

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

Name of Employer **STEPHENS, INC.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2262

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CARLA KNOBLOCH

Mailing Address **919 MILAM STREET
SUITE 1900**

City **HOUSTON** State **TX** Zip Code **77002-5382**

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

Name of Employer **OWNERS FUND** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2532

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JULIA F. KOCH

Mailing Address **P.O. BOX 2256**

City **WICHITA** State **KS** Zip Code **67201-2256**

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 **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2195

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

3850.00

**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 87 OF 280
	<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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2441

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BAKER KURRUS

Mailing Address **10816 CRESTDALE LANE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3626**

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
07 / 17 / 2014

Transaction ID : SA11.1993

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CRAIG 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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2496

Amount of Each Receipt this Period
500.00
 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 88 OF 280
	<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. DIANA LACY

Mailing Address **1 LAKEWOOD DRIVE**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72116-6959**

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

Name of Employer **STEPHENS, INC.** Occupation **PROPERTY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2276

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LEE A. LAHOUCADE

Mailing Address **1216 NANTUCKET**

City **HOUSTON** State **TX** Zip Code **77057-1906**

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

Name of Employer **HOUSTON TRUST COMPANY** 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
09 / 25 / 2014

Transaction ID : SA11.2562

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEVIN LAMB

Mailing Address **7003 VALLEY RANCH DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-4696**

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

Name of Employer **ADVANCED TISSUE** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2323

Amount of Each Receipt this Period
2600.00

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 89 OF 280
	<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. SHARON LAMB

Mailing Address 7003 VALLEY RANCH DRIVE

City State Zip Code
LITTLE ROCK AR 72223-4696

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 Y Y
 08 / 28 / 2014

Transaction ID : SA11.2324

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAI LAMBERT

Mailing Address 9 CONNELL DRIVE

City State Zip Code
LITTLE ROCK AR 72205-1507

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

Name of Employer Occupation
STRATOS GROUP, L.L.C. ART DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2322

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

IN-KIND CONTRIBUTION OF GRAPHIC DESIGN SERVICES

C. Full Name (Last, First, Middle Initial)
MRS. JILL LAWRENCE

Mailing Address 8201 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72227-2453

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

Name of Employer Occupation
J. LAWRENCE DESIGN INTERIOR DESIGNER

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
 07 / 17 / 2014

Transaction ID : SA11.1992

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

3350.00

**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 280
	<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. BARRY LEDBETTER

Mailing Address 2915 ABERNATHY LAKE COVE

City State Zip Code
JONESBORO AR 72404-8403

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK CENTRAL ARKANSAS REGIONAL CHAIRMA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2300

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BARRY LEDBETTER

Mailing Address 2915 ABERNATHY LAKE COVE

City State Zip Code
JONESBORO AR 72404-8403

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK CENTRAL ARKANSAS REGIONAL CHAIRMA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2725

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LESLIE LEE

Mailing Address 2303 BEECHWOOD STREET

City State Zip Code
LITTLE ROCK AR 72207-2025

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2235

Amount of Each Receipt this Period
1000.00
 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 91 OF 280
	<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. STEPHEN LESSING

Mailing Address **9 SNAKE HILL ROAD**

City **COLD SPRING HARBOR** State **NY** Zip Code **11724-1105**

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

Name of Employer **BARCLAYS CAPITAL, INC.** Occupation **BROKER-DEALER AGENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
946.47

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1970

Amount of Each Receipt this Period
946.47
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. EUGENE LEWIS JR.

Mailing Address **2200 NORTH PALM STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-2050**

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

Name of Employer **LEWIS REALTY AND ASSOCIATES** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2214

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALEX LIEBLONG

Mailing Address **P.O. BOX 24520**

City **LITTLE ROCK** State **AR** Zip Code **72221-4520**

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

Name of Employer **LIEBLONG AND ASSOCIATES, INC.** Occupation **INVESTMENTS**

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
08 / 21 / 2014

Transaction ID : SA11.2278

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2446.47

**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 92 OF 280
	<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. JUDITH LIGON

Mailing Address 12115 HINSON ROAD

City State Zip Code
LITTLE ROCK AR 72212-3474

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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2126

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

Mailing Address 64 COUNTRY CLUB CIRCLE

City State Zip Code
SEARCY AR 72143-8904

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
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2445

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANNY LINN

Mailing Address P.O. BOX 2230

City State Zip Code
CONWAY AR 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
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.1879

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 93 OF 280
	<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. WALTER A. LLOYD

Mailing Address 313 SKYLINE DRIVE

City NORTH LITTLE ROCK State AR Zip Code 72116-9225

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

Name of Employer AD AMERICAN ADVERTISING SPECIALTIES, Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2391

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 13000 RIVERCREST DRIVE

City LITTLE ROCK State AR Zip Code 72212-1449

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
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2454

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FLETCHER F. LORD JR.

Mailing Address 2214 COUNTRY CLUB LANE

City LITTLE ROCK State AR Zip Code 72207-2042

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

Name of Employer REPLACEMENT PARTS, INC. Occupation MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2651

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 94 OF 280
(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. WALLY LOVELESS

Mailing Address 11621 RAINWOOD ROAD
SUITE 4

City State Zip Code
LITTLE ROCK AR 72212-3947

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

Name of Employer Occupation
ADKINS, MCNEIL, SMITH, AND ASSOCIATES REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2311

Amount of Each Receipt this Period
 250.00
 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
MAGGIE MABREY EYE CLINIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2148

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. 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
MAGGIE MABREY EYE CLINIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11.2484

Amount of Each Receipt this Period
 250.00
 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 95 OF 280
	<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)
MRS. FREDNA MAHAFFEY

Mailing Address **3720 EAST EAGLESCLIFFE DRIVE**

City **SPRINGFIELD** State **MO** Zip Code **65809-4639**

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

Name of Employer **MAHAFFEY ENTERPRISES** Occupation **CORPORATE SECRETARY**

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
09 / 30 / 2014

Transaction ID : SA11.2722

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE A. MAKRIS JR.

Mailing Address **900 WEST 46TH STREET #7**

City **PINE BLUFF** State **AR** Zip Code **71603-7164**

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

Name of Employer **SIMMONS FIRST NATIONAL CORPORTATION** Occupation **CHAIRMAN AND CHIEF EXECUTIVE OFFICE**

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
08 / 21 / 2014

Transaction ID : SA11.2250

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE A. MAKRIS JR.

Mailing Address **900 WEST 46TH STREET #7**

City **PINE BLUFF** State **AR** Zip Code **71603-7164**

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

Name of Employer **SIMMONS FIRST NATIONAL CORPORTATION** Occupation **CHAIRMAN AND CHIEF EXECUTIVE OFFICE**

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
09 / 30 / 2014

Transaction ID : SA11.2727

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2250.00

**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 96 OF 280
	<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. JASON MANN

Mailing Address 73 VILLAS CIRCLE

City State Zip Code
LITTLE ROCK AR 72223-5190

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

Name of Employer Occupation
USABLE LIFE INSURANCE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2160

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JILL ANDERSON MARSDEN

Mailing Address 916 CLUB STATION DRIVE NE

City State Zip Code
ATLANTA GA 30319-1155

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

Name of Employer Occupation
SELF EMPLOYED WARDROBE CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2012

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES P. MARSH

Mailing Address 4027 NORBOURNE BOULEVARD

City State Zip Code
LOUISVILLE KY 40207-3805

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

Name of Employer Occupation
GAULT MARSH PROPERTIES REAL ESTATE DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2464

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 97 OF 280
	<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. CAROLE A. MARTIN

Mailing Address P.O. BOX 469

City: MENA State: AR Zip Code: 71953-0469

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: 2600.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.2638

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DARLENE C. MARTIN

Mailing Address 4006 LAKEVIEW ROAD

City: NORTH LITTLE ROCK State: AR Zip Code: 72116-7303

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1200.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11.2673

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 15550

City: LITTLE ROCK State: AR Zip Code: 72231-5550

FEC ID number of contributing federal political committee: C

Name of Employer: GRACE OIL, L.L.C. Occupation: INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 11 / 2014

Transaction ID : SA11.2463

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

3850.00

**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 98 OF 280
	<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. 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. INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2581

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN H. MARUYAMA

Mailing Address 4131 HARRISON STREET NW

City State Zip Code
WASHINGTON DC 20015-1941

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

Name of Employer Occupation
HOGAN LOVELLS ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2766

Amount of Each Receipt this Period
150.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. CHARLES F. MASON

Mailing Address 38 FOREST VALLEY LANE

City State Zip Code
LITTLE ROCK AR 72223-4709

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
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2362

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

650.00

**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 99 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. FARREL E. MASON

Mailing Address 1 TREETOPS LANE
 #204

City State Zip Code
 LITTLE ROCK AR 72202-1677

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
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2014

Transaction ID : SA11.2492

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JESSE MASON

Mailing Address 14 DUCLAIR COURT

City State Zip Code
 LITTLE ROCK AR 72223-9570

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

Name of Employer Occupation
 UNIVERSITY OF ARKANSAS AT LITTLE ROCK DIRECTOR CO-OP EDUCATION

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
 09 11 2014

Transaction ID : SA11.2456

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. MATTOX

Mailing Address 4716 BUNKER HILL ROAD

City State Zip Code
 NORTH LITTLE ROCK AR 72116-6914

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 Y Y
 08 21 2014

Transaction ID : SA11.2305

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 100 OF 280
	<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. MARVIN H. MAURRAS

Mailing Address P.O. BOX 21258

City State Zip Code
LITTLE ROCK AR 72221-1258

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
2670.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2253

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN MAUS III

Mailing Address 1187 S HIGHWAY 9

City State Zip Code
MORRILTON AR 72110-4625

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

Name of Employer Occupation
MAUS IMPLEMENT COMPANY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2409

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CAROLYN R. MAY

Mailing Address 35 ROBINWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2227

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

Name of Employer Occupation
CAROLYN R. MAY, C.S.C.P. COMPLIANCE CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1961

Amount of Each Receipt this Period
500.00
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 101 OF 280
	<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. JAMES M. MAY III

Mailing Address **35 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2227**

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 Y Y
07 / 17 / 2014

Transaction ID : SA11.1954

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS MAY

Mailing Address **501 MAIN STREET**

City **PINE BLUFF** State **AR** Zip Code **71601-4327**

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

Name of Employer **SIMMONS FIRST NATIONAL BANK** Occupation **CHAIRMAN**

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
07 / 17 / 2014

Transaction ID : SA11.1958

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WALTER E. MAY

Mailing Address **4201 WOODLAND DRIVE**

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

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2141

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 102 OF 280
	<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 E. MCCARLEY

Mailing Address 5614 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5314

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
700.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2426

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2140

Amount of Each Receipt this Period
15.00
CONTRIBUTION

C. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2418

Amount of Each Receipt this Period
25.00
CONTRIBUTION

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

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

240.00

**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 103 OF 280
	<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 MCCLENDON

Mailing Address P.O. BOX 210

City MONTICELLO State AR Zip Code 71657-0210

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

Name of Employer DREW COTTON SEED OIL MILL, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1974.46

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2723

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLINT MCDONNOUGH

Mailing Address 4806 BLUFFVIEW BOULEVARD

City DALLAS State TX Zip Code 75209-2035

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

Name of Employer ERNST AND YOUNG Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2582

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HUGH T. MCDONALD

Mailing Address 52 FONTENAY CIRCLE

City LITTLE ROCK State AR Zip Code 72223-9568

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

Name of Employer ENTERGY ARKANSAS Occupation C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2406

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 104 OF 280
	<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. ALLEN MCDOWELL

Mailing Address 5455 SCENIC DRIVE

City State Zip Code
LITTLE ROCK AR 72207-1921

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
09 / 25 / 2014

Transaction ID : SA11.2602

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HAYDEN MCILROY

Mailing Address 25 HIGHLAND PARK VILLAGE
SUITE 100-341

City State Zip Code
DALLAS TX 75205-2789

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

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2485

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LESTER MCKINLEY

Mailing Address P.O. BOX 446

City State Zip Code
DEWITT AR 72042-0446

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

Name of Employer Occupation
FARELLY LAKE COMPANY FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2102

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 105 OF 280
	<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. BARRY MCKUIN

Mailing Address 822 EAST BURROW

City MORRILTON State AR Zip Code 72110-4409

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

Name of Employer MCKUIN PROPERTIES, L.L.C. Occupation OWNER

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
 09 / 04 / 2014

Transaction ID : SA11.2408

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW B. MEADORS

Mailing Address 315 ROCK STREET #1707

City LITTLE ROCK State AR Zip Code 72202-5502

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

Name of Employer MEADORS, ADAMS, & LEE Occupation INSURANCE AGENCY EXECUTIVE

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
 09 / 25 / 2014

Transaction ID : SA11.2549

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. CAROL C. MEADORS

Mailing Address 3 SUNSET DRIVE

City LITTLE ROCK State AR Zip Code 72207-1821

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
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11.2090

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

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

3350.00

**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 106 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. FREDERICK A. MEADORS
 Mailing Address **3 SUNSET DRIVE**
 City State Zip Code
LITTLE ROCK AR 72207-1821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
CATHOLIC HEALTH INITIATIVES PHYSICIAN
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 31 2014
Transaction ID : SA11.2091
 Amount of Each Receipt this Period
2600.00
 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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 28 2014
Transaction ID : SA11.2355
 Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALLAN MENDEL
 Mailing Address **18 RIVER RIDGE CIRCLE**
 City State Zip Code
LITTLE ROCK AR 72227-1503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
MENDEL CAPITAL MANAGEMENT INVESTMENT MANAGER
 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
08 14 2014
Transaction ID : SA11.2206
 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 107 OF 280
	<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 F. MENZEL

Mailing Address 60 EDSON STREET

City State Zip Code
AMSTERDAM NY 12010-5239

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

Name of Employer Occupation
FIBER GLASS INDUSTRIES, INC. CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2396

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DONALD F. MILLER

Mailing Address 808 GOLF VIEW DRIVE

City State Zip Code
SEARCY AR 72143-4564

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

Name of Employer Occupation
WEAVER BAILEY CONTRACTORS 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
 09 / 25 / 2014

Transaction ID : SA11.2603

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ADAM MITCHELL

Mailing Address 76 ABERDEEN DRIVE

City State Zip Code
LITTLE ROCK AR 72223-9101

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2680

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

3100.00

**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 108 OF 280
	<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. DAVID MOIX

Mailing Address 6215 GREENWOOD

City State Zip Code
LITTLE ROCK AR 72207-1842

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

Name of Employer Occupation
STEPHENS, INC. VICE 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
08 / 28 / 2014

Transaction ID : SA11.2314

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL E. MONTGOMERY

Mailing Address RADIUS GROUP L.L.C.
10121 RODNEY PARHAM ROAD SUITE #5

City State Zip Code
LITTLE ROCK AR 72227-5597

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

Name of Employer Occupation
RADIUS GROUP C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2563

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES D. MORGAN

Mailing Address 1111 MAIN STREET
SUITE 206

City State Zip Code
CONWAY AR 72032-5449

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

Name of Employer Occupation
PRIVACY STAR 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
09 / 25 / 2014

Transaction ID : SA11.2585

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 109 OF 280
	<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. JOE MORGAN

Mailing Address **26 DUCLAIR COURT**

City **LITTLE ROCK** State **AR** Zip Code **72223-9570**

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
07 / 24 / 2014

Transaction ID : SA11.2021

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROLAND R. MORGAN

Mailing Address **210 NEMOURS COVE**

City **MAUMELLE** State **AR** Zip Code **72113-6755**

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
09 / 11 / 2014

Transaction ID : SA11.2468

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RANDALL G. MOUROT

Mailing Address **2212 BEECHWOOD**

City **LITTLE ROCK** State **AR** Zip Code **72207-2024**

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

Name of Employer **PREMIUM REFRESHMENTS** 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
07 / 17 / 2014

Transaction ID : SA11.1952

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2250.00

**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 110 OF 280
	<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. JOSEPH MOWERY

Mailing Address 3715 DORAL DRIVE

City State Zip Code
LITTLE ROCK AR 72212-2923

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

Name of Employer Occupation
STEPHENS, INC. INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.1995

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DON MUNRO

Mailing Address P.O. BOX 1157

City State Zip Code
HOT SPRINGS AR 71902-1157

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

Name of Employer Occupation
MUNRO AND COMPANY, INC. SHOE MANUFACTURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2265

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. SUSAN DOUGLAS MUNSON

Mailing Address 44 ROBINWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2226

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

Name of Employer Occupation
DOUGLAS COMPANIES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2254

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 111 OF 280
	<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 R. MURRAY

Mailing Address 10472 TOWNSHIP ROAD 94

City State Zip Code
FINDLAY OH 45840-2013

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.1997

Amount of Each Receipt this Period

CONTRIBUTION

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

Mailing Address 4630 SAWGRASS COVE

City State Zip Code
CONWAY AR 72034-5006

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THE NABHOLZ GROUP, INC. CHAIRMAN EMERITUS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2433

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT DAN NABHOLZ

Mailing Address 2500 BROOKFIELD DRIVE

City State Zip Code
CONWAY AR 72032-4495

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.1849

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 112 OF 280
	<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. LARRY NAFE

Mailing Address **8611 BARRETT ROAD**

City **ROLAND** State **AR** Zip Code **72135-9779**

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

Name of Employer **HILLCREST ANIMAL HOSPITAL** Occupation **VETERINARIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2282

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RENE NAUMAN

Mailing Address **3615 DORCEL**

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

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
07 / 24 / 2014

Transaction ID : SA11.2009

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **46 COACHLIGHT DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-6463**

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

Name of Employer **HEART OF ARKANSAS UNITED WAY** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2641

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: PAGE 113 OF 280
(check only one)
 11a 11b 11c 11d 11e
 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. SHEFFIELD NELSON
 Mailing Address 25 PHELLOS COURT
 City State Zip Code
 LITTLE ROCK AR 72223-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 JACK, NELSON, JONES, AND BRYANT 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 Y Y
 07 17 2014
Transaction ID : SA11.1962
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BEN NOBLE
 Mailing Address 187 PLEASANT VALLEY DRIVE
 City State Zip Code
 LITTLE ROCK AR 72212-3153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NOBLE STRATEGIES CONSULTANT
 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
 09 11 2014
Transaction ID : SA11.2438
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BRIANT C. NOLAND
 Mailing Address 36 BEVERLY PLACE
 City State Zip Code
 LITTLE ROCK AR 72207-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STEPHENS, INC. FINNANICAL ADVISOR
 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
 08 28 2014
Transaction ID : SA11.2312
 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 114 OF 280
	<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. GEORGE A. NORTON

Mailing Address **1 LONGFELLOW SQUARE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3725**

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2414

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BERNARD T. NUGENT

Mailing Address **64 RESPLANDOR WAY**

City **HOT SPRINGS** State **AR** Zip Code **71909-7717**

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
700.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2449

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

Mailing Address **3301 FOXCROFT ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72227-2324**

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
09 / 11 / 2014

Transaction ID : SA11.2443

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

550.00

**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 115 OF 280
	<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. RALPH O'CONNOR

Mailing Address 10000 MEMORIAL DRIVE
SUITE 510

City HOUSTON State TX Zip Code 77024-3411

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 Y Y
 09 / 30 / 2014

Transaction ID : SA11.2702

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN LEE OSTNER

Mailing Address 304 NORTH RIDGE ROAD

City LITTLE ROCK State AR Zip Code 72207-2522

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

Name of Employer SELF EMPLOYED Occupation FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11.2483

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FORD OVERTON

Mailing Address 8800 FERNDAL CUTOFF ROAD

City LITTLE ROCK State AR Zip Code 72223-8916

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

Name of Employer WEST TREE SERVICE 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 Y Y
 08 / 07 / 2014

Transaction ID : SA11.2203

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2500.00

**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 116 OF 280
	<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)
MRS. STEPHANIE OVERTON

Mailing Address 6300 FORBING ROAD

City State Zip Code
LITTLE ROCK AR 72209-3534

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

Name of Employer Occupation
WEST TREE SERVICE 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
 08 / 07 / 2014

Transaction ID : SA11.2156

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CATHY HASTINGS OWEN

Mailing Address 43 ROBINWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2225

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

Name of Employer Occupation
EAGLE BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11.1949

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEITH PAGE

Mailing Address 110 WYNDAM TRACE

City State Zip Code
HOUSTON TX 77056-2534

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

Name of Employer Occupation
PROSPERITY BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11.2522

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 117 OF 280
	<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)
GENERAL WILLIAM C. PAGE JR.

Mailing Address 12 MASTERS PLACE DRIVE

City MAUMELLE State AR Zip Code 72113-7019

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2382

Amount of Each Receipt this Period

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.

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2108

Amount of Each Receipt this Period

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.

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2654

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 118 OF 280
	<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. DAVID PARKER

Mailing Address 1700 NORTH SHACKLEFORD

City State Zip Code
LITTLE ROCK AR 72212-4012

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

Name of Employer Occupation
PARKER CADILLIAC, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2321

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

Mailing Address 27 GOLDEN EAGLE DRIVE

City State Zip Code
PARON AR 72122-8066

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

Name of Employer Occupation
POW, INC. SECRETARY/TREASURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2370

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 1 HICKORY CREEK COVE

City State Zip Code
LITTLE ROCK AR 72212-2525

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

Name of Employer Occupation
PARKER CADILLAC, INC. 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
 08 / 28 / 2014

Transaction ID : SA11.2345

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

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

5000.00

**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 119 OF 280
	<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. KYLE PATTON

Mailing Address **54 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2226**

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

Name of Employer **THE CAPITAL BANK** Occupation **PRESIDENT/C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1965

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CHERYL PAYNE-NESUDA

Mailing Address **17 ALTON LANE**

City **LITTLE ROCK** State **AR** Zip Code **72211-2191**

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
08 / 21 / 2014

Transaction ID : SA11.2292

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CHERYL PAYNE-NESUDA

Mailing Address **17 ALTON LANE**

City **LITTLE ROCK** State **AR** Zip Code **72211-2191**

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
09 / 04 / 2014

Transaction ID : SA11.2377

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

600.00

**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 120 OF 280
	<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. DANIEL PEREGRIN

Mailing Address P.O. BOX 2472

City State Zip Code
LITTLE ROCK AR 72203-2472

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11.2219

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. H.R. PEROT

Mailing Address P.O. BOX 269014

City State Zip Code
PLANO TX 75026-9014

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

Name of Employer Occupation
HILLWOOD DEVELOPMENT COMPANY, L.L.C. 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
 09 / 25 / 2014

Transaction ID : SA11.2589

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN SCOTT PETTY

Mailing Address 4037 BRYN MAWR

City State Zip Code
DALLAS TX 75225-7032

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

Name of Employer Occupation
CHARTWELL PARTNERS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2649

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3850.00

**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 121 OF 280
	<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 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
975.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2373

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEANNE L. PHILLIPS

Mailing Address 5421 DRANE DRIVE

City State Zip Code
DALLAS TX 75209-5503

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

Name of Employer Occupation
HUNT OIL COMPANY EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2540

Amount of Each Receipt this Period
1600.00
CONTRIBUTION

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

Mailing Address 123 ORLEANS DRIVE

City State Zip Code
MAUMELLE AR 72113-6770

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

Name of Employer Occupation
MICHAEL PICKENS LAW FIRM 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
09 / 11 / 2014

Transaction ID : SA11.2469

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2150.00

**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 122 OF 280
	<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. ELIZABETH PLUMLEE

Mailing Address 5578 KEMPES CIRCLE

City State Zip Code
DALLAS TX 75220-

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

Name of Employer Occupation
CARTER, SCHOLER, ARNETT, HAMADA, & M 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
09 / 25 / 2014

Transaction ID : SA11.2614

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLARENCE POLLOCK III

Mailing Address 216 NORMANDY ROAD

City State Zip Code
LITTLE ROCK AR 72207-5124

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

Name of Employer Occupation
STEPHENS, INC. FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2258

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LILLIAN T. PORTER

Mailing Address 2108 BEECHWOOD AVENUE

City State Zip Code
LITTLE ROCK AR 72207-2022

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
1500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2098

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 123 OF 280
	<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)
MRS. LILLIAN T. PORTER

Mailing Address 2108 BEECHWOOD AVENUE

City State Zip Code
LITTLE ROCK AR 72207-2022

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2692

Amount of Each Receipt this Period

CONTRIBUTION

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

Mailing Address 875 BRYANT AVENUE

City State Zip Code
WINNETKA IL 60093-1903

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KIRKLAND AND ELLIS, L.L.P. ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2429

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ROBERT E. POWERS

Mailing Address P.O. BOX 7288

City State Zip Code
LITTLE ROCK AR 72217-7288

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2142

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 124 OF 280
	<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. JOEL PRITCHETT

Mailing Address **918 SKYLINE DRIVE**

City **SEARCY** State **AR** Zip Code **72143-6510**

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
08 / 28 / 2014

Transaction ID : SA11.2331

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GEORGE LEYDEN PUGH JR.

Mailing Address **4697 HIGHWAY 82 EAST**

City **LAKE VILLAGE** State **AR** Zip Code **71653-6064**

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

Name of Employer **ARKANSAS AG COMPANY** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11.2223

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS R. PUGH SR.

Mailing Address **14300 CHENAL PARKWAY #7119**

City **LITTLE ROCK** State **AR** Zip Code **72211-5812**

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
08 / 21 / 2014

Transaction ID : SA11.2251

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 125 OF 280
	<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. PULLARA

Mailing Address 1111 HERMANN DRIVE
SUITE 21A

City HOUSTON State TX Zip Code 77004-6931

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11.2103

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. PULLARA

Mailing Address 1111 HERMANN DRIVE
SUITE 21A

City HOUSTON State TX Zip Code 77004-6931

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2714

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY L. PURNELL

Mailing Address 3219 IMPERIAL VALLEY DRIVE

City LITTLE ROCK State AR Zip Code 72212-3111

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
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11.2293

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 126 OF 280
(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. GARY L. PURNELL

Mailing Address 3219 IMPERIAL VALLEY DRIVE

City State Zip Code
LITTLE ROCK AR 72212-3111

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
 09 11 2014

Transaction ID : SA11.2455

Amount of Each Receipt this Period
 1600.00
 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
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 14 2014

Transaction ID : SA11.2221

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 5800 CHASEVIEW ROAD

City State Zip Code
NASHVILLE TN 37221-4115

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11.2657

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

2350.00

**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 127 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. GORDON S. RATHER JR.

Mailing Address 200 WEST CAPITOL AVENUE
SUITE 2300

City Little Rock State AR Zip Code 72201-3615

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

Name of Employer Occupation
WRIGHT, LINDSEY, & JENNINGS L.L.P. ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11.2088

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GORDON S. RATHER JR.

Mailing Address 200 WEST CAPITOL AVENUE
SUITE 2300

City Little Rock State AR Zip Code 72201-3615

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

Name of Employer Occupation
WRIGHT, LINDSEY, & JENNINGS L.L.P. ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2420

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY REDWINE

Mailing Address 4416 SAN CARLOS

City DALLAS State TX Zip Code 75205-2054

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

Name of Employer Occupation
SHEPERD ROYALTY, L.L.C. OIL AND GAS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2613

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 128 OF 280
	<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. CAROL M. REED

Mailing Address **3701 TURTLE CREEK BOULEVARD**

City **DALLAS** State **TX** Zip Code **75219-5507**

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

Name of Employer **CAROL REED ASSOCIATES, INC.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2612

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **5 LONGFELLOW PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3723**

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

Name of Employer **STEPHENS, INC.** Occupation **CHIEF EXECUTIVE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2412

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **4718 HALLMARK DRIVE
APT. 1051**

City **HOUSTON** State **TX** Zip Code **77056-3918**

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 **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2491

Amount of Each Receipt this Period
100.00
 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 129 OF 280
	<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. PHILLIP E. RICKELS

Mailing Address 311 MCMILLEN TRAIL

City State Zip Code
LITTLE ROCK AR 72207-5119

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

Name of Employer Occupation
FRAZIER RICKELS, 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
 09 / 30 / 2014

Transaction ID : SA11.2729

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN A. RIGGS IV

Mailing Address P.O. BOX 1399

City State Zip Code
LITTLE ROCK AR 72203-1399

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

Name of Employer Occupation
J.A. RIGGS TRACTOR CO. C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11.1868

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

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

Mailing Address 2309 BEECHWOOD

City State Zip Code
LITTLE ROCK AR 72207-2025

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11.2093

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: (check only one)	PAGE 130 OF 280
	<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. 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 **900.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2558

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT RITTELMAYER

Mailing Address **1621 NORTH JACKSON STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-5445**

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

Name of Employer **RAYMOND JAMES** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2089

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT RITTELMAYER

Mailing Address **1621 NORTH JACKSON STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-5445**

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

Name of Employer **RAYMOND JAMES** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2536

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: (check only one)	PAGE 131 OF 280
	<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. MARY ROACH

Mailing Address **4 BIENVILLE COURT**

City **LITTLE ROCK** State **AR** Zip Code **72211-2104**

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
08 / 07 / 2014

Transaction ID : SA11.2167

Amount of Each Receipt this Period
350.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CORBIN J. ROBERTSON JR.

Mailing Address **601 JEFFERSON STREET
SUITE 3600**

City **HOUSTON** State **TX** Zip Code **77002-7906**

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

Name of Employer **QUNITANA MINERALS** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2617

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **49 TALLYHO LANE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2443**

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

Name of Employer **STERNE, AGEE** Occupation **INVESTMENT SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2097

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2350.00

**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 132 OF 280
	<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. GAIN L. ROBINSON

Mailing Address 4600 KENYON DRIVE

City State Zip Code
LITTLE ROCK AR 72205-1930

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

Name of Employer Occupation
MCLARTY COMPANIES ASSOCIATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2569

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 State Zip Code
LITTLE ROCK AR 72207-5132

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

Name of Employer Occupation
LRGOGREEN.COM OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.1998

Amount of Each Receipt this Period
 75.00
 CONTRIBUTION

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

Mailing Address 7 GAY PLACE

City State Zip Code
LITTLE ROCK AR 72207-5132

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

Name of Employer Occupation
LRGOGREEN.COM OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2572

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

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

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

350.00

**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 133 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

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

Mailing Address 2845 GULFSHORE DRIVE

City State Zip Code
 CONWAY AR 72034-8507

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

Name of Employer Occupation
 PACKERS PLUS OIL AND GAS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2471

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JUAN CARLOS ROMAN

Mailing Address 58 HALLEN COURT

City State Zip Code
 LITTLE ROCK AR 72223-5092

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
 09 / 25 / 2014

Transaction ID : SA11.2586

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 6 PALISADES DRIVE

City State Zip Code
 LITTLE ROCK AR 72207-

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

Name of Employer Occupation
 TAYLOR AND STUCKEY, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2424

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: PAGE 134 OF 280
(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. THOMAS W. ROY III
 Mailing Address 800 CHERRY HILL DRIVE
 City State Zip Code
 NORTH LITTLE ROCK AR 72116-9134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FRANK FLETCHER GROUP C.F.O.
 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
 09 25 2014
Transaction ID : SA11.2601
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS S. RUSSELL
 Mailing Address 8 GLENLEIGH DRIVE
 City State Zip Code
 LITTLE ROCK AR 72227-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 THOMAS S. RUSSELL LANDSCAPE ARCHITE LANDSCAPE ARCHITECT
 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
 07 17 2014
Transaction ID : SA11.1966
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK SAVIERS
 Mailing Address 1701 CENTERVIEW DRIVE
 SUITE 312 ATTN: VICKI AND MARK SAV
 City State Zip Code
 LITTLE ROCK AR 72211-4313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SAVIERS PARTNERS, L.L.C. COMMERCIAL REAL ESTATE
 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
 07 31 2014
Transaction ID : SA11.2092
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

3250.00

**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 135 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. KEVIN M. SCANLON
 Mailing Address 5524 NORTH GRANDVIEW STREET
 City State Zip Code
 LITTLE ROCK AR 72207-1912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STEPHENS, INC. EXECUTIVE VICE PRESIDENT
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 21 2014
Transaction ID : SA11.2255
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP W. SCHMIDT
 Mailing Address 39 ST. JOHNS PLACE
 City State Zip Code
 LITTLE ROCK AR 72207-3700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FLAKE AND KELLEY COMMERCIAL BROKER
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 17 2014
Transaction ID : SA11.1959
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. JENNIFER SCHUBERT-AKIN
 Mailing Address P.O. BOX 883037
 City State Zip Code
 STEAMBOAT SPRINGS CO 80488-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MARATHON ACCOUNTING SERVICES, L.L.C. FOUNDER AND C.E.O.
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014
Transaction ID : SA11.2718
 Amount of Each Receipt this Period
 250.00
 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 136 OF 280
	<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. CHARLES C. SCHUCHARD

Mailing Address 1 PINE VIEW COVE

City State Zip Code
LITTLE ROCK AR 72212-2006

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
700.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2488

Amount of Each Receipt this Period
200.00
CONTRIBUTION

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

Mailing Address 3 HEARTHSIDE

City State Zip Code
LITTLE ROCK AR 72207-1603

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

Name of Employer Occupation
STEPHENS GROUP INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2034

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES D. SCOTT

Mailing Address 2100 COVINGTON DRIVE

City State Zip Code
NORTH LITTLE ROCK AR 72116-4909

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

Name of Employer Occupation
JAMES D. SCOTT INSURANCE AGENT 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
08 / 14 / 2014

Transaction ID : SA11.2220

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1450.00

**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 137 OF 280
	<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. THOMAS A. SCULLY

Mailing Address 320 PARK AVENUE
SUITE 250

City State Zip Code
NEW YORK NY 10022-6815

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

Name of Employer Occupation
WELSH, CARSON, ANDERSON, AND STOWE PRIVATE EQUITY 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
09 / 11 / 2014

Transaction ID : SA11.2457

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KAREN SEALANDER

Mailing Address 111 10TH STREET, N.E.

City State Zip Code
WASHINGTON DC 20002-6211

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

Name of Employer Occupation
MCDERMOTT, WILL, & EMERY ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2715

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN S. SELIG

Mailing Address 23224 FOXRIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72223-5994

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

Name of Employer Occupation
MITCHELL WILLIAMS LAW ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2277

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2250.00

**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 138 OF 280
	<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)
MRS. MEREDITH SHELTON

Mailing Address **5 EVERGREEN CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72207-6130**

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

Name of Employer **HOWLAND AND NORRIS** Occupation **C.P.A.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2200

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
850.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2374

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

C. 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
850.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2430

Amount of Each Receipt this Period
250.00
 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 139 OF 280
	<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 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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2013

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. BELINDA H. SHULTS

Mailing Address **1915 CANAL POINTE**

City **LITTLE ROCK** State **AR** Zip Code **72202-1427**

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
08 / 07 / 2014

Transaction ID : SA11.2147

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BARRY L. SIMON

Mailing Address **11823 FAIRWAY DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3422**

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

Name of Employer **DATAMAX, INC.** 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
07 / 31 / 2014

Transaction ID : SA11.2105

Amount of Each Receipt this Period
250.00
 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 140 OF 280
	<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. JAMES D. SIMPSON III

Mailing Address 18 ARMISTEAD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5428

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

Name of Employer Occupation
STEPHENS, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2442

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN SIMPSON

Mailing Address 2211 BEECHWOOD

City State Zip Code
LITTLE ROCK AR 72207-2023

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

Name of Employer Occupation
STEPHENS, INC. INVESTMENT MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2257

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 5220 STONEWALL ROAD

City State Zip Code
LITTLE ROCK AR 72207-4522

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
09 / 18 / 2014

Transaction ID : SA11.2489

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1450.00

**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 141 OF 280
	<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

Full Name (Last, First, Middle Initial) MR. DEWITT H. SMITH		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2014
Mailing Address 1 TROUT FARM		Transaction ID : SA11.2165
City BELLA VISTA	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer DEVEREUX MANAGEMENT COMPANY	Occupation REAL ESTATE MANAGEMENT AND INVESTI	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. GRIFFIN SMITH		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 24 EAST PALISADES		Transaction ID : SA11.2647
City LITTLE ROCK	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF EMPLOYED	Occupation ATTORNEY AT LAW	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) MR. GRIFFIN SMITH		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 24 EAST PALISADES		Transaction ID : SA11.2711
City LITTLE ROCK	State AR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer SELF EMPLOYED	Occupation ATTORNEY AT LAW	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	800.00
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 142 OF 280
	<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 R. SMITH

Mailing Address **5 LONGFELLOW CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3719**

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

Name of Employer **STEPHENS, INC.** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2478

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY ROSS SMITH

Mailing Address **P.O. BOX 2985**

City **FORT SMITH** State **AR** Zip Code **72913-2985**

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

Name of Employer **ROSS EXPLORATIONS, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11.2117

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

Mailing Address **9601 BAPTIST HEALTH DRIVE
SUITE 100**

City **LITTLE ROCK** State **AR** Zip Code **72205-6321**

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

Name of Employer **RADIOLOGY CONSULTANTS LITTLE ROCK** Occupation **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
08 / 21 / 2014

Transaction ID : SA11.2284

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

5200.00

**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 143 OF 280
	<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. TODD M. SMITH

Mailing Address **9601 BAPTIST HEALTH DRIVE
SUITE 100**

City **LITTLE ROCK** State **AR** Zip Code **72205-6321**

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

Name of Employer **RADIOLOGY CONSULTANTS LITTLE ROCK** Occupation **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
09 / 30 / 2014

Transaction ID : SA11.2677

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TED SNIDER SR.

Mailing Address **571 VALLEY CLUB CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72212-3453**

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
08 / 14 / 2014

Transaction ID : SA11.2217

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENT SORRELLS

Mailing Address **15700 SORRELLS ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72223-4213**

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

Name of Employer **THE STEPHENS GROUP, L.L.C.** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2154

Amount of Each Receipt this Period
500.00
 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 144 OF 280
	<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. RICARDO SOTOMORA

Mailing Address **3 RIVER RIDGE COURT**

City **LITTLE ROCK** State **AR** Zip Code **72227-1513**

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

Name of Employer **PEDIATRIX MEDICAL GROUP OF ARKANSAS** 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
09 / 30 / 2014

Transaction ID : SA11.2635

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MIKE W. SPADES JR.

Mailing Address **208 CAMBRIDGE PLACE DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2100**

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

Name of Employer **MICHAEL SPADES, JR., ATTORNEY AT LAW** 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
07 / 24 / 2014

Transaction ID : SA11.2024

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY V. SPARKS

Mailing Address **3610 POTOMAC AVENUE**

City **TEXARKANA** State **TX** Zip Code **75503-3520**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2175

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 145 OF 280
	<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. LIAS J. STEEN

Mailing Address **3 OAKLAWN DRIVE**

City **HOUSTON** State **TX** Zip Code **77024-5210**

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

Name of Employer **OIL STATES INTERNATIONAL, INC.** Occupation **ATTORNEY AT LAW**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11.1863

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LAURA STEPHENS

Mailing Address **1 LONGFELLOW PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3723**

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

Name of Employer **ROONEY SCHMIDT AND ASSOCIATES, INC.** Occupation **ASSOCIATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2347

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN STEPHENSON

Mailing Address **68 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2224**

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

Name of Employer **PARTY CITY OF ARKANSAS, INC.** 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
07 / 17 / 2014

Transaction ID : SA11.1953

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

7200.00

**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 146 OF 280
	<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. WITT R. STEPHENS JR.

Mailing Address **9 SUNSET CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72207-1717**

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

Name of Employer **STEPHENS GROUP, L.L.C.** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2273

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRENT STEVENSON

Mailing Address **2412 FAIRWAY AVENUE**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72116-8527**

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

Name of Employer **BRENT STEVENSON ASSOCIATES** 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
09 / 04 / 2014

Transaction ID : SA11.2393

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address **1013 SAWMILL ROAD**

City **CROSSVILLE** State **TN** Zip Code **38555-1433**

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

Name of Employer **TAP PUBLISHING COMPANY** Occupation **C.E.O.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2564

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4600.00

**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 147 OF 280
	<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. PHILIP STOWERS

Mailing Address 143 PLEASANTWOOD DRIVE

City MAUMELLE State AR Zip Code 72113-7072

FEC ID number of contributing federal political committee.

Name of Employer UNITED HEALTHCARE Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2394

Amount of Each Receipt this Period

 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NOEL STRAUSS

Mailing Address 37 EDGEHILL ROAD

City LITTLE ROCK State AR Zip Code 72207-5461

FEC ID number of contributing federal political committee.

Name of Employer STEPHENS INC. Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2007

Amount of Each Receipt this Period

 CONTRIBUTION

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

Mailing Address 300 EAST 3RD #1007

City LITTLE ROCK State AR Zip Code 72201-1672

FEC ID number of contributing federal political committee.

Name of Employer GILEAD SCIENCES Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2629

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 148 OF 280
	<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)
THE HONORA JOHN F. STROUD JR.

Mailing Address 1313 COUNTRY CLUB LANE

City TEXARKANA State AR Zip Code 71854-7720

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2453

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. SUTHERLAND

Mailing Address 4000 MAIN STREET

City KANSAS CITY State MO Zip Code 64111-2313

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2398

Amount of Each Receipt this Period

CONTRIBUTION

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

Mailing Address 4000 MAIN STREET

City KANSAS CITY State MO Zip Code 64111-2313

FEC ID number of contributing federal political committee.

Name of Employer SUTHERLANDS LUMBER Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2397

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 149 OF 280
	<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. MADISON TAPPAN

Mailing Address **8 EAST PALISADES**

City **LITTLE ROCK** State **AR** Zip Code **72207-1904**

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

Name of Employer **KNIGHTVEST MANAGEMENT** Occupation **INVESTMENT ANALYSIS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2298

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY J. TATE

Mailing Address **13404 RIDGE HAVEN**

City **LITTLE ROCK** State **AR** Zip Code **72211-2220**

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

Name of Employer **FIRST BAPTIST LITTLE ROCK** Occupation **BUSINESS MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11.1947

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY J. TATE

Mailing Address **13404 RIDGE HAVEN**

City **LITTLE ROCK** State **AR** Zip Code **72211-2220**

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

Name of Employer **FIRST BAPTIST LITTLE ROCK** Occupation **BUSINESS MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2509

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 150 OF 280
	<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. ALAN B. TEDFORD

Mailing Address 1814 SHADOW LANE

City State Zip Code
LITTLE ROCK AR 72207-2016

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

Name of Employer Occupation
STEPHENS, INC. INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2252

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM L. TEDFORD JR.

Mailing Address 5607 HAWTHORNE

City State Zip Code
LITTLE ROCK AR 72207-4307

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

Name of Employer Occupation
STEPHENS, INC. INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.1874

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 11 LAVAL COURT

City State Zip Code
LITTLE ROCK AR 72223-8902

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

Name of Employer Occupation
WINDSTREAM COMMUNICATIONS C.F.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2596

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2500.00

**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 151 OF 280
	<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. FRANK THOMAS

Mailing Address 14601 BLACK BEAR DRIVE

City State Zip Code
LITTLE ROCK AR 72223-1993

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

Name of Employer Occupation
STEPHENS INVESTMENTS HOLDINGS, L.L.C ASSISTANT TO THE CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 21 2014

Transaction ID : SA11.2267

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. HENRY A. THOMAS

Mailing Address 36 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5462

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

Name of Employer Occupation
JONES EYE U.A.M.S. OPHTHALMOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 24 2014

Transaction ID : SA11.2003

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 State Zip Code
BETHESDA MD 20817-4029

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

Name of Employer Occupation
JOHN F. THOMAS AND COMPANY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 18 2014

Transaction ID : SA11.2503

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 152 OF 280
	<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. KIRKLEY A. THOMAS

Mailing Address 228 TAYLOR PARK DRIVE

City State Zip Code
LITTLE ROCK AR 72211-4077

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

Name of Employer Occupation
ELECTRIC COOPERATIVES OF ARKANSAS VICE PRESIDENT OF GOVERNMENT AFFAIR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11.2388

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. 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
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2467

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. VAN TILBURY

Mailing Address 15 GLENLEIGH DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2207

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

Name of Employer Occupation
EAST-HARDING, INC. GENERAL CONTRACTOR/CONSTRUCTION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2320

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2250.00

**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 153 OF 280
	<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 T. TRUESDELL

Mailing Address 11 WINGFIELD CIRCLE

City State Zip Code
LITTLE ROCK AR 72205-1636

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

Name of Employer Occupation
CAPITOL ADVERTISING SPECIALTIES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2004

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN T. TRUESDELL

Mailing Address 11 WINGFIELD CIRCLE

City State Zip Code
LITTLE ROCK AR 72205-1636

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

Name of Employer Occupation
CAPITOL ADVERTISING SPECIALTIES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2658

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address 3436 HAYNIE #5

City State Zip Code
DALLAS TX 75205-1878

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

Name of Employer Occupation
J. RICHARD TUBBS, P.L.L.C. 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
08 / 28 / 2014

Transaction ID : SA11.2329

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1200.00

**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 154 OF 280
	<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 W. TUCKER

Mailing Address 5225 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5413

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

Name of Employer Occupation
STEPHENS, INC. MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11.2315

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 31 EAGLE VALLEY ROAD

City State Zip Code
CONWAY AR 72032-9542

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

Name of Employer Occupation
CONWAY REGIONAL MEDICAL CENTER ATTORNEY/HUMAN RESOURCE DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2494

Amount of Each Receipt this Period
25.00
CONTRIBUTION

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

Mailing Address 2604 NORTH FILLMORE STREET

City State Zip Code
LITTLE ROCK AR 72207-3617

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

Name of Employer Occupation
STEPHENS, INC. MANAGING DIRECTOR, INVESTMENT BANK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2446

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2025.00

**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 155 OF 280
	<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. JACK VAUGHN JR.

Mailing Address 5325 WANETA DRIVE

City	State	Zip Code
DALLAS	TX	75209-5611

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

Name of Employer	Occupation
PEAK ENERGY RESOURCES, L.L.C.	OIL AND GAS INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11.2207

Amount of Each Receipt this Period
 _____ 2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GUS M. VRATSINAS

Mailing Address 69 PINEHURST CIRCLE

City	State	Zip Code
LITTLE ROCK	AR	72212-3432

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

Name of Employer	Occupation
VRATSINAS ENTERPRISES L.L.C.	MANAGING MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2144

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GUS M. VRATSINAS

Mailing Address 69 PINEHURST CIRCLE

City	State	Zip Code
LITTLE ROCK	AR	72212-3432

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

Name of Employer	Occupation
VRATSINAS ENTERPRISES L.L.C.	MANAGING MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11.2249

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

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

_____ 4600.00

**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 156 OF 280
	<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 WADE

Mailing Address 1909 NORTH SPRUCE STREET

City State Zip Code
LITTLE ROCK AR 72207-4717

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

Name of Employer Occupation
HAUGHTY, WADE, L.L.P. 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
07 / 10 / 2014

Transaction ID : SA11.1872

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEVE WADE

Mailing Address 11200 EDEN LANE

City State Zip Code
LITTLE ROCK AR 72212-3104

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK SR EXECUTIVE VICE PRESIDENT & CHIEF C

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.1957

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVE WADE

Mailing Address 11200 EDEN LANE

City State Zip Code
LITTLE ROCK AR 72212-3104

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK SR EXECUTIVE VICE PRESIDENT & CHIEF C

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2270

Amount of Each Receipt this Period
1000.00
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 157 OF 280
	<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. STEVE WADE

Mailing Address 11200 EDEN LANE

City State Zip Code
LITTLE ROCK AR 72212-3104

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK SR EXECUTIVE VICE PRESIDENT & CHIEF C

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2557

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. STEPHANIE WADE

Mailing Address 111 CENTER STREET

City State Zip Code
LITTLE ROCK AR 72201-4402

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

Name of Employer Occupation
POE TRAVEL TRAVEL CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.1881

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD J. WALL SR.

Mailing Address 2660 CHESTNUT STREET

City State Zip Code
SAN FRANCISCO CA 94123-2408

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

Name of Employer Occupation
O'DONNELL, WEISS, WALL, & MESCHKE ATTORNEY AT LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2656

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

3250.00

**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 158 OF 280
	<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. ROGER WALLACE

Mailing Address 3424 GILLESPIE #7

City DALLAS State TX Zip Code 75219-4867

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

Name of Employer PIONEER NATURAL RESOURCES 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 Y Y
 09 / 25 / 2014

Transaction ID : SA11.2546

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MILLIE WARD

Mailing Address 16 GLENRIDGE ROAD

City LITTLE ROCK State AR Zip Code 72227-2230

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

Name of Employer STONE WARD 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 Y Y
 07 / 17 / 2014

Transaction ID : SA11.1960

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER S. WAREING

Mailing Address 3355 WEST ALABAMA SUITE 630

City HOUSTON State TX Zip Code 77098-1799

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

Name of Employer SELF EMPLOYED Occupation INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2661

Amount of Each Receipt this Period
 1300.00

CONTRIBUTION

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

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

2800.00

**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 159 OF 280
	<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. STEVEN WARREN

Mailing Address **17 DURANCE DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9133**

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

Name of Employer **B.K.D., L.L.P.** Occupation **C.P.A.**

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
09 / 11 / 2014

Transaction ID : SA11.2439

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. 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 **1600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2158

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DONALD L. WEAVER

Mailing Address **450 HANNAH DRIVE**

City **CONWAY** State **AR** Zip Code **72034-7265**

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

Name of Employer **WEAVER-BAILEY CONTRACTORS, INC.** Occupation **VICE 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 Y Y
08 / 07 / 2014

Transaction ID : SA11.2193

Amount of Each Receipt this Period
500.00
 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 160 OF 280
	<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. STEPHEN H. WELLS

Mailing Address 19905 CRYSTAL HILL ROAD

City State Zip Code
MAUMELLE AR 72113-

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

Name of Employer Occupation
CATHOLIC HIGH SCHOOL TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2411

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALAN BROCK WHISENHUNT SR.

Mailing Address 4301 KENYON DRIVE

City State Zip Code
LITTLE ROCK AR 72205-2012

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

Name of Employer Occupation
THE JANET JONES COMPANY REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2359

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. CATHERINE W. WHITESIDE

Mailing Address 2905 NORTH FILLMORE STREET

City State Zip Code
LITTLE ROCK AR 72207-2812

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

Name of Employer Occupation
LOCAL COLOR ARTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11.2127

Amount of Each Receipt this Period
 1000.00
 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 161 OF 280
	<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. 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
2250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2419

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address P.O. BOX 1788

City State Zip Code
NORTH LITTLE ROCK AR 72115-1788

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

Name of Employer Occupation
COULSON OIL OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11.2508

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 71 VIGNE BOULEVARD

City State Zip Code
LITTLE ROCK AR 72223-4582

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

Name of Employer Occupation
BLUE CROSS BLUE SHIELD PRESIDENT AND C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2150

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 162 OF 280
	<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. STACY S. WILKIRSON

Mailing Address 557 WEST DANA LANE

City HOUSTON State TX Zip Code 77024-6700

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2695

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL WILLIAMS

Mailing Address 205 MIRAMAR BOULEVARD

City LITTLE ROCK State AR Zip Code 72223-3200

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

Name of Employer: **GARVER ENGINEERS** Occupation: **CIVIL ENGINEER**

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
 09 / 30 / 2014

Transaction ID : SA11.2691

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. 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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2554

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 163 OF 280
	<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. MARK V. WILLIAMSON

Mailing Address P.O. BOX 7503

City State Zip Code
LITTLE ROCK AR 72217-

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

Name of Employer Occupation
MARK V. WILLIAMSON CO., INC. INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2002

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY T. WILSON

Mailing Address #3 NIXON DRIVE

City State Zip Code
JACKSONVILLE AR 72076-5516

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

Name of Employer Occupation
FIRST ARKANSAS BANK AND TRUST BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3414.69

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2152

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HARDY L. WINBURN

Mailing Address 300 EAST THIRD UNIT 1202

City State Zip Code
LITTLE ROCK AR 72201-1673

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

Name of Employer Occupation
U.B.S. FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11.2425

Amount of Each Receipt this Period
500.00

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 164 OF 280
	<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. HARRIGAN WORTSMITH

Mailing Address 324 NORTH RIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72207-2522

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
09 / 18 / 2014

Transaction ID : SA11.2510

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LYNN WRIGHT

Mailing Address 301 EASY STREET

City State Zip Code
LITTLE ROCK AR 72223-5091

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

Name of Employer Occupation
REGIONS BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11.2547

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address P.O. BOX 78

City State Zip Code
SEARCY AR 72145-0078

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
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11.2668

Amount of Each Receipt this Period
500.00
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 165 OF 280
	<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. BILL YEE

Mailing Address 11700 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72223-1712

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

Name of Employer Occupation
DELTA TRUST AND BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1125.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : SA11.2157

Amount of Each Receipt this Period
750.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CLAYTON YEUTTER

Mailing Address 10955 MARTINGALE COURT

City State Zip Code
POTOMAC MD 20854-1500

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

Name of Employer Occupation
HOGAN LOVELLS, L.L.P. 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
08 / 21 / 2014

Transaction ID : SA11.2280

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RANDY ZOOK

Mailing Address P.O. BOX 265

City State Zip Code
MELBOURNE AR 72556-0265

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

Name of Employer Occupation
ARKANSAS STATE CHAMBER PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : SA11.2256

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

2250.00

**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 166 OF 280
	<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)
CAPITOL ADVISORS GROUP, L.L.C.

Mailing Address 1401 WEST CAPITOL AVENUE
SUITE 247

City Little Rock State AR Zip Code 72201-2928

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
 09 / 11 / 2014

Transaction ID : SA11.2889

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW.

B. Full Name (Last, First, Middle Initial)
MR. MITCHELL LOWE

Mailing Address 11212 ROCKY VALLEY DRIVE

City Little Rock State AR Zip Code 72212-3132

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

Name of Employer Occupation
CAPITOL ADVISORS GROUP PARTNER

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
 09 / 11 / 2014

Transaction ID : SA11.2891

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION.

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

Mailing Address 1401 WEST CAPITOL AVENUE
SUITE 247

City Little Rock State AR Zip Code 72201-2928

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

Name of Employer Occupation
CAPITOL ADVISORS GROUP PARTNER

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
 09 / 11 / 2014

Transaction ID : SA11.2890

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION.

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 167 OF 280
	<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)
STEVE GRANT REAL ESTATE, L.L.C.

Mailing Address P.O. BOX 350

City State Zip Code
ATHENS TX 75751-0350

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
 09 / 25 / 2014

Transaction ID : SA11.2611

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SEE ATTRIBUTION BELOW.

B. Full Name (Last, First, Middle Initial)
MRS. CLAIRE GRANT

Mailing Address 411 PARK DRIVE

City State Zip Code
ATHENS TX 75751-3246

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11.2888

Amount of Each Receipt this Period
500.00

CONTRIBUTION

[MEMO ITEM]
PARTNERSHIP ATTRIBUTION.

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).....

500.00

358156.20

**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 168 OF 280	
	<input type="checkbox"/> 11a 12	<input checked="" 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)
FAULKNER COUNTY REPUBLICAN COMMITTEE

Mailing Address P.O. BOX 2438

City CONWAY State AR Zip Code 72033-2438

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2686

Amount of Each Receipt this Period

CONTRIBUTION

LOCAL PARTY COMMITTEE - CONFIRMED ALL FUNDS ARE FEDERALLY PERMISSIBLE.

B. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF CRAWFORD COUNTY

Mailing Address P.O. BOX 6040

City VAN BUREN State AR Zip Code 72956-0118

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2242

Amount of Each Receipt this Period

CONTRIBUTION

LOCAL PARTY COMMITTEE - CONFIRMED ALL FUNDS ARE FEDERALLY PERMISSIBLE.

C. Full Name (Last, First, Middle Initial)
SALINE REPUBLICAN COMMITTEE

Mailing Address 9767 MEYERS ROAD

City BENTON State AR Zip Code 72019-8218

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.2236

Amount of Each Receipt this Period

CONTRIBUTION

LOCAL PARTY COMMITTEE - CONFIRMED ALL FUNDS ARE FEDERALLY PERMISSIBLE.

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 169 OF 280
	<input type="checkbox"/> 11a 12 <input checked="" 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)
SECOND CONGRESSIONAL DISTRICT REPUBLICAN COMMITTEE

Mailing Address 218 GRIGGS STREET
SUITE A

City CLINTON State AR Zip Code 72031-7089

FEC ID number of contributing federal political committee. **C** C00453076

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11.2399

Amount of Each Receipt this Period
 500.00
 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).....

500.00

2250.00

**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 170 OF 280
	<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)
ANDY HARRIS FOR CONGRESS

Mailing Address 13401 REDCOAT LANE

City PHOENIX State MD Zip Code 21131-

FEC ID number of contributing federal political committee. **C** C00435974

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 Y Y
 07 / 24 / 2014

Transaction ID : SA11.2085

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BILL FLORES FOR CONGRESS

Mailing Address P.O. BOX 6207

City BRYAN State TX Zip Code 77805-

FEC ID number of contributing federal political committee. **C** C00472241

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 Y Y
 07 / 24 / 2014

Transaction ID : SA11.2071

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRYNE FOR CONGRESS, INC.

Mailing Address P.O. BOX 2743

City MOBILE State AL Zip Code 36652-

FEC ID number of contributing federal political committee. **C** C00464297

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 Y Y
 07 / 24 / 2014

Transaction ID : SA11.2075

Amount of Each Receipt this Period
 500.00
 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 171 OF 280
	<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)
DUFFY FOR CONGRESS

Mailing Address P.O. BOX 538

City WAUSAU State WI Zip Code 54402-

FEC ID number of contributing federal political committee. **C** C00464339

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
 08 / 07 / 2014

Transaction ID : SA11.2174

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address P.O. BOX 5053

City CONCORD State NC Zip Code 28027-

FEC ID number of contributing federal political committee. **C** C00504522

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
 07 / 24 / 2014

Transaction ID : SA11.2077

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address P.O. BOX 12667

City BAKERSFIELD State CA Zip Code 93389-

FEC ID number of contributing federal political committee. **C** C00420935

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
 08 / 21 / 2014

Transaction ID : SA11.2302

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 172 OF 280
	<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)
LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City State Zip Code
SHELBYVILLE IN 46176-

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2479

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MOLL FOR CONGRESS

Mailing Address P.O. BOX 21795

City State Zip Code
HOT SPRINGS AR 71903-

FEC ID number of contributing federal political committee. **C C00548255**

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
 09 / 18 / 2014

Transaction ID : SA11.2525

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City State Zip Code
ROSWELL GA 30077-

FEC ID number of contributing federal political committee. **C C00386755**

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
 09 / 30 / 2014

Transaction ID : SA11.2772

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

2750.00

**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 173 OF 280
	<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)
RE-ELECT TIM GRIFFIN FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 7526

City State Zip Code
LITTLE ROCK AR 72217-

FEC ID number of contributing federal political committee. **C** C00468116

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
08 / 21 / 2014

Transaction ID : SA11.2304

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROTHFUS FOR CONGRESS

Mailing Address 309 QUAKER ROAD

City State Zip Code
SEWICKLEY PA 15143-1162

FEC ID number of contributing federal political committee. **C** C00497115

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
09 / 30 / 2014

Transaction ID : SA11.2663

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY
SUITE 206

City State Zip Code
METAIRIE LA 70006-

FEC ID number of contributing federal political committee. **C** C00394957

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
09 / 30 / 2014

Transaction ID : SA11.2735

Amount of Each Receipt this Period
2000.00
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 174 OF 280
	<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. WESTMORELAND FOR CONGRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 458
 City SHARPSBURG State GA Zip Code 30277-
 FEC ID number of contributing federal political committee. **C** C00387126
 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
 07 / 24 / 2014
Transaction ID : SA11.2081
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. PULASKI COUNTY REPUBLICAN WOMEN PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 17303
 City LITTLE ROCK State AR Zip Code 72222-7303
 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
 09 / 25 / 2014
Transaction ID : SA11.2591
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION
 NON FEDERAL PAC - CONFIRMED ALL FUNDS ARE
 FEDERALLY PERMISSIBLE

C. AFIT-PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 PRINCE STREET
 SUITE 225
 City ALEXANDRIA State VA Zip Code 22314-2882
 FEC ID number of contributing federal political committee. **C** C00250399
 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
 09 / 30 / 2014
Transaction ID : SA11.2773
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

6500.00

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

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

FOR LINE NUMBER: PAGE 175 OF 280
(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)
AFLAC, INC. PAC

Mailing Address **2470 DANIELL'S BRIDGE ROAD**
SUITE 121

City **ATHENS** State **GA** Zip Code **30606-6191**

FEC ID number of contributing federal political committee. **C C00034157**

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 Y Y
09 / 30 / 2014

Transaction ID : SA11.2664

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALAMO PAC

Mailing Address **919 CONGRESS AVENUE**
SUITE 1400

City **AUSTIN** State **TX** Zip Code **78701-2114**

FEC ID number of contributing federal political committee. **C C00387464**

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 Y Y
08 / 07 / 2014

Transaction ID : SA11.2197

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL POLITICAL ACTION COMMITTEE

Mailing Address **1111 14TH STREET, N.W.**
SUITE 1100

City **WASHINGTON** State **DC** Zip Code **20005-5627**

FEC ID number of contributing federal political committee. **C C00000729**

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 Y Y
09 / 25 / 2014

Transaction ID : SA11.2600

Amount of Each Receipt this Period
2500.00
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: PAGE 176 OF 280

(check only one)

<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 INSTITUTE OF C.P.A.S PAC

Mailing Address **220 LEIGH FARM ROAD**

City **DURHAM** State **NC** Zip Code **27707-8110**

FEC ID number of contributing federal political committee. **C C00077321**

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
09		30		2014

Transaction ID : SA11.2736

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address **1061 AMERICAN LANE**

City **SCHAUMBURG** State **IL** Zip Code **60173-4973**

FEC ID number of contributing federal political committee. **C C00255752**

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
09		18		2014

Transaction ID : SA11.2529

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARKANSAS BEST CORPORATION PAC

Mailing Address **P.O. BOX 48**

City **FORT SMITH** State **AR** Zip Code **72902-0048**

FEC ID number of contributing federal political committee. **C C00193383**

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
08		14		2014

Transaction ID : SA11.2230

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

8500.00

**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 177 OF 280
	<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)
ARKANSAS FOR LEADERSHIP PAC

Mailing Address P.O. BOX 1672

City State Zip Code
ALEXANDRIA VA 22313-1672

FEC ID number of contributing federal political committee. **C C00413948**

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
 09 / 30 / 2014

Transaction ID : SA11.2732

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARVEST BANK GROUP, INC. PAC

Mailing Address P.O. BOX 799

City State Zip Code
LOWELL AR 72745-0799

FEC ID number of contributing federal political committee. **C C00336768**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11.1869

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ASPLUNDH TREE EXPERT CO. PAC

Mailing Address 708 BLAIR MILL ROAD

City State Zip Code
WILLOW GROVE PA 19090-1701

FEC ID number of contributing federal political committee. **C C00177741**

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
 09 / 30 / 2014

Transaction ID : SA11.2771

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

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

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

12500.00

**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 178 OF 280
	<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. ASSOCIATED EQUIPMENT DISTRIBUTORS PAC

Full Name (Last, First, Middle Initial)
ASSOCIATED EQUIPMENT DISTRIBUTORS PAC

Mailing Address 121 NORTH HENRY STREET

City ALEXANDRIA State VA Zip Code 22314-2903

FEC ID number of contributing federal political committee. **C** C00010124

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
 08 / 21 / 2014

Transaction ID : SA11.2296

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. ASSOCIATED GENERAL CONTRACTORS PAC

Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS PAC

Mailing Address 53 D STREET, S.E.

City WASHINGTON State DC Zip Code 20003-4017

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 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11.2523

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

C. BADLANDS PAC

Full Name (Last, First, Middle Initial)
BADLANDS PAC

Mailing Address P.O. BOX 26141

City ALEXANDRIA State VA Zip Code 22313-

FEC ID number of contributing federal political committee. **C** C00543207

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
 09 / 30 / 2014

Transaction ID : SA11.2775

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 179 OF 280
	<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. BANK OF AMERICA CORPORATION STATE AND FEDERAL PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1100 NORTH KING STREET

City State Zip Code
WILMINGTON DE 19884-0011

FEC ID number of contributing federal political committee. **C C00043489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11.2365

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

B. CATHY MCMORRIS ROGERS PAC

Full Name (Last, First, Middle Initial)
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
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2086

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)
Mailing Address 1006 PENNSYLANIA AVENUE, S.E.

City State Zip Code
WASHINGTON DC 20003-2142

FEC ID number of contributing federal political committee. **C C00295527**

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
 09 / 30 / 2014

Transaction ID : SA11.2777

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 180 OF 280
	<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)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON State VA Zip Code 20190-5803

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2066

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA

Mailing Address 110 WEST LOUISIANA AVENUE SUITE 312

City MIDLAND State TX Zip Code 79701-3414

FEC ID number of contributing federal political committee. **C** C00409458

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
 08 / 07 / 2014

Transaction ID : SA11.2199

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA

Mailing Address 110 WEST LOUISIANA AVENUE SUITE 312

City MIDLAND State TX Zip Code 79701-3414

FEC ID number of contributing federal political committee. **C** C00409458

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
 09 / 25 / 2014

Transaction ID : SA11.2578

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 181 OF 280
	<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)
CONSERVATIVE ROUNDTABLE

Mailing Address P.O. BOX 97275

City RALEIGH State NC Zip Code 27624-7275

FEC ID number of contributing federal political committee. **C** C00549725

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
 09 / 25 / 2014

Transaction ID : SA11.2587

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON State VA Zip Code 20190-5803

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2767

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CONTINUING A MAJORITY PARTY ACTION COMMITTEE

Mailing Address 5915 EASTMAN AVENUE
SUITE 100

City MIDLAND State MI Zip Code 48640-

FEC ID number of contributing federal political committee. **C** C00350462

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
 07 / 31 / 2014

Transaction ID : SA11.2116

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 182 OF 280
	<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)
DELOITTE FEDERAL PAC

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

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
 09 / 30 / 2014

Transaction ID : SA11.2778

Amount of Each Receipt this Period
 _____ 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ERNST & YOUNG PAC

Mailing Address 1101 NEW YORK AVENUE, N.W.

City WASHINGTON State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

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
 08 / 07 / 2014

Transaction ID : SA11.2201

Amount of Each Receipt this Period
 _____ 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2067

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

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

_____ 8500.00

**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 183 OF 280
	<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)
EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2731

Amount of Each Receipt this Period
 4000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FREEDOM AND SECURITY PAC

Mailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00437061

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
 09 / 30 / 2014

Transaction ID : SA11.2685

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD
SUITE I-2

City State Zip Code
WEST CHESTER OH 45069-6629

FEC ID number of contributing federal political committee. **C** C00237198

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
 08 / 07 / 2014

Transaction ID : SA11.2204

Amount of Each Receipt this Period
 2000.00
 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 184 OF 280
	<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)
GOLD CIRCLE FEDERAL PAC

Mailing Address P.O. BOX 10127

City State Zip Code
FORT SMITH AR 72917-0127

FEC ID number of contributing federal political committee. **C C00289728**

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
 09 / 11 / 2014

Transaction ID : SA11.2476

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C C00326439**

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
 07 / 24 / 2014

Transaction ID : SA11.2070

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUCK PAC

Mailing Address P.O. BOX 2008

City State Zip Code
LITTLE ROCK AR 72203-

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11.1968

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C00448373

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 185 OF 280
	<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)
ICE PAC

Mailing Address 9158 EAST STARRING LANE

City State Zip Code
EDEN PRAIRIE MN 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
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2082

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
IMPACT COMMITTEE

Mailing Address 120 WEST 2ND STREET
SUITE 1510

City State Zip Code
DAYTON OH 45402-

FEC ID number of contributing federal political committee. **C C00525238**

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
09 / 18 / 2014

Transaction ID : SA11.2531

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS PAC

Mailing Address 1615 L STREET, N.W.
SUITE 900

City State Zip Code
WASHINGTON DC 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

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
09 / 30 / 2014

Transaction ID : SA11.2737

Amount of Each Receipt this Period
2500.00
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 186 OF 280
	<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)
INTERNATIONAL FOODSERVICE DISTRIBUTORS ASSOCIATION PAC

Mailing Address 1410 SPRING HILL ROAD
SUITE 210

City MCLEAN State VA Zip Code 22102-3035

FEC ID number of contributing federal political committee. **C** C00383521

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
 09 / 30 / 2014

Transaction ID : SA11.2667

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INVEST IN A STRONG AND SECURE AMERICA PAC

Mailing Address 8001 IRVINE CENTER DRIVE
SUITE 400

City IRVINE State CA Zip Code 92618-2956

FEC ID number of contributing federal political committee. **C** C00450320

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
 08 / 07 / 2014

Transaction ID : SA11.2198

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INVEST IN A STRONG AND SECURE AMERICA PAC

Mailing Address 8001 IRVINE CENTER DRIVE
SUITE 400

City IRVINE State CA Zip Code 92618-2956

FEC ID number of contributing federal political committee. **C** C00450320

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
 09 / 18 / 2014

Transaction ID : SA11.2516

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

5000.00

**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 187 OF 280
	<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. INVEST IN A STRONG AND SECURE AMERICA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 8001 IRVINE CENTER DRIVE
SUITE 400

City IRVINE State CA Zip Code 92618-2956

FEC ID number of contributing federal political committee. **C C00450320**

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
 09 / 30 / 2014

Transaction ID : SA11.2659

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. JOBS, ECONOMY, AND BUDGET FUND

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C C00420695**

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
 08 / 14 / 2014

Transaction ID : SA11.2229

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. JOHN BOLTON PAC

Full Name (Last, First, Middle Initial)
Mailing Address 610 SOUTH BOULEVARD

City TAMPA State FL Zip Code 33606-2693

FEC ID number of contributing federal political committee. **C C00542431**

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
 08 / 28 / 2014

Transaction ID : SA11.2346

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

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

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

12000.00

**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 188 OF 280
	<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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11.2187

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEAD YOUR NATION NOW PAC

Mailing Address P.O. BOX 1872

City State Zip Code
TOPEKA KS 66601-1872

FEC ID number of contributing federal political committee. **C C00491043**

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
 07 / 24 / 2014

Transaction ID : SA11.2084

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. 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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2074

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 189 OF 280
	<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. MAJORITY COMMITTEE PAC

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389-0134

FEC ID number of contributing federal political committee. **C** C00428052

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 Y Y
 08 / 21 / 2014

Transaction ID : SA11.2415

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. MAKING AMERICA PROSPEROUS PAC

Full Name (Last, First, Middle Initial)
MAKING AMERICA PROSPEROUS PAC

Mailing Address P.O. BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00445379

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
 07 / 24 / 2014

Transaction ID : SA11.2078

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. MCGUIRE WOODS PAC

Full Name (Last, First, Middle Initial)
MCGUIRE WOODS PAC

Mailing Address 901 EAST CARY STREET

City RICHMOND State VA Zip Code 23219-4063

FEC ID number of contributing federal political committee. **C** C00225342

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
 08 / 14 / 2014

Transaction ID : SA11.2240

Amount of Each Receipt this Period
 1000.00

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: PAGE 190 OF 280
(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)
MORE CONSERVATIVES 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 C00540187**

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
07 / 24 / 2014

Transaction ID : SA11.2068

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS PAC

Mailing Address **430 NORTH MICHIGAN AVENUE**

City **CHICAGO** State **IL** Zip Code **60611-4011**

FEC ID number of contributing federal political committee. **C C00030718**

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
08 / 28 / 2014

Transaction ID : SA11.2358

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION

Mailing Address **1101 KING STREET**
SUITE 1600

City **ALEXANDRIA** State **VA** Zip Code **22314-2944**

FEC ID number of contributing federal political committee. **C C00144766**

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
09 / 18 / 2014

Transaction ID : SA11.2518

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

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

11000.00

**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 191 OF 280
	<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)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

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
 09 / 30 / 2014

Transaction ID : SA11.2739

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC

Mailing Address P.O. BOX 619911

City DALLAS State TX Zip Code 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

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
 09 / 30 / 2014

Transaction ID : SA11.2625

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS PAC

Mailing Address 1201 F STREET, N.W.
SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

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
 09 / 30 / 2014

Transaction ID : SA11.2688

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 192 OF 280
	<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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2666

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. NATIONAL RESTAURANT ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 2055 L STREET, N.W.
SUITE 700

City WASHINGTON State DC Zip Code 20036-

FEC ID number of contributing federal political committee. **C** C00003764

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
 09 / 30 / 2014

Transaction ID : SA11.2643

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. NEW PAC

Full Name (Last, First, Middle Initial)
NEW PAC

Mailing Address P.O. BOX 7480

City VISALIA State CA Zip Code 93290-7480

FEC ID number of contributing federal political committee. **C** C00398750

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
 07 / 24 / 2014

Transaction ID : SA11.2080

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

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(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)
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
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2069

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRIOTS IN ACTION

Mailing Address **1005 CONGRESS AVENUE**
SUITE 910

City **AUSTIN** State **TX** Zip Code **78701-2467**

FEC ID number of contributing federal political committee. **C C00531590**

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
09 / 30 / 2014

Transaction ID : SA11.2724

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. 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
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11.2076

Amount of Each Receipt this Period
2000.00
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 194 OF 280
	<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)
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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11.2461

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PIONEER NATURAL RESOURCES USA, INC. PAC

Mailing Address 5205 NORTH O'CONNOR BOULEVARD
SUITE 200

City IRVING State TX Zip Code 75039-3789

FEC ID number of contributing federal political committee. **C C00420950**

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
 09 / 30 / 2014

Transaction ID : SA11.2769

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2079

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2500.00

**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 195 OF 280
	<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) R.O.S.K.A.M. PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 610 SOUTH BOULEVARD		Transaction ID : SA11.2738
City TAMPA	State FL Zip Code 33606-2693	
FEC ID number of contributing federal political committee.	C C00451294	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) REGIONS FINANCIAL CORPORATION PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2014
Mailing Address 1015 15TH STREET, N.W. SUITE 920		Transaction ID : SA11.2575
City WASHINGTON	State DC Zip Code 20005-2623	
FEC ID number of contributing federal political committee.	C C00432252	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) RICELAND FOODS, INC. PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 927		Transaction ID : SA11.2684
City STUTTGART	State AR Zip Code 72160-0927	
FEC ID number of contributing federal political committee.	C C00551275	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	9000.00
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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 196 OF 280

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL PAC

Mailing Address 4800 WEST GATES PASS ROAD

City TUSCON State AZ Zip Code 85745-9600

FEC ID number of contributing federal political committee. **C** C00122101

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
 09 / 25 / 2014

Transaction ID : SA11.2623

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SOUTHWESTERN ENERGY COMPANY PAC

Mailing Address P.O. BOX 789

City CONWAY State AR Zip Code 72033-0789

FEC ID number of contributing federal political committee. **C** C00190652

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
 09 / 04 / 2014

Transaction ID : SA11.2379

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SPECTRA ENERGY CORPORATION PAC

Mailing Address 5400 WESTHEIMER COURT

City HOUSTON State TX Zip Code 77056-5353

FEC ID number of contributing federal political committee. **C** C00429662

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
 08 / 07 / 2014

Transaction ID : SA11.2170

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

5000.00

**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 197 OF 280
	<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)
STAND TALL AMERICA PAC

Mailing Address P.O. BOX 2382

City State Zip Code
AMARILLO TX 79105-2382

FEC ID number of contributing federal political committee. **C C00404418**

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
 08 / 28 / 2014

Transaction ID : SA11.2349

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUPPORT TO ENSURE VICTORY EVERYWHERE PAC

Mailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11.2083

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW PAC

Mailing Address P.O. BOX 905

City State Zip Code
NEWTON NJ 07860-0905

FEC ID number of contributing federal political committee. **C C00453324**

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
 09 / 30 / 2014

Transaction ID : SA11.2776

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 198 OF 280
	<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. TEAM REPUBLICANS UTILIZING SENSIBLE TACTICS PAC

Full Name (Last, First, Middle Initial)
Mailing Address 104 EAST HUME AVENUE

City ALEXANDRIA State VA Zip Code 22301-1015

FEC ID number of contributing federal political committee. **C** C00330720

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
 08 / 07 / 2014

Transaction ID : SA11.2196

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. THE BOEING COMPANY PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1200 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

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
 09 / 30 / 2014

Transaction ID : SA11.2774

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. THE FREEDOM PROJECT

Full Name (Last, First, Middle Initial)
Mailing Address 320 FIRST STREET, S.E.

City WASHINGTON State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00305805

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 Y Y
 08 / 07 / 2014

Transaction ID : SA11.2169

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

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

11000.00

**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 199 OF 280
	<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 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2665

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TYSON FOODS, INC. PAC

Mailing Address P.O. BOX 2020

City SPRINGDALE State AR Zip Code 72765-2020

FEC ID number of contributing federal political committee. **C C00169821**

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 Y Y
 07 / 24 / 2014

Transaction ID : SA11.2072

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORPORATION FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET, N.W.
SUITE 350

City WASHINGTON State DC Zip Code 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11.2770

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

6500.00

**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 200 OF 280
	<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)
VOICE OF FREEDOM PAC

Mailing Address 2700 CUMBERLAND PARKWAY
SUITE 150

City ATLANTA State GA Zip Code 30339-3321

FEC ID number of contributing federal political committee. **C** C00409805

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
 07 / 24 / 2014

Transaction ID : SA11.2073

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WEDGE PAC

Mailing Address P.O. BOX 680063

City FRANKLIN State TN Zip Code 37068-0063

FEC ID number of contributing federal political committee. **C** C00409276

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
 08 / 21 / 2014

Transaction ID : SA11.2308

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA

Mailing Address 805 15TH STREET, N.W.
SUITE 430

City WASHINGTON State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

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
 07 / 24 / 2014

Transaction ID : SA11.2032

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

6500.00

191750.00

**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 201 OF 280
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 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)
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 2057.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.2733

Amount of Each Receipt this Period
 2057.68

CONTRIBUTION

TRANSFER OF JOINT FUNDRAISING PROCEEDS.
SEE ATTRIBUTION BELOW

B. Full Name (Last, First, Middle Initial)
MR. RONALD M. CAMERON

Mailing Address P.O. BOX 21440

City LITTLE ROCK State AR Zip Code 72221-1440

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

Name of Employer Occupation
MOUNTAINAIRE CORP. C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.2883

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

[MEMO ITEM]
ATTRIBUTION OF JOINT FUNDRAISING COMMITTEE TRANSFER.

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

Mailing Address 3 ELMWOOD

City PINE BLUFF State AR Zip Code 71603-7139

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

Name of Employer Occupation
THE RETZER GROUP C.E.O.

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
 09 / 30 / 2014

Transaction ID : SA12.2882

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

[MEMO ITEM]
ATTRIBUTION OF JOINT FUNDRAISING COMMITTEE TRANSFER.

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

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

2057.68

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

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

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) YOUNG GUNS DAY III 2014		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014	
Mailing Address 228 S WASHINGTON ST. SUITE 115		Transaction ID : SA12.2884	
City ALEXANDRIA	State VA	Zip Code 22314-5404	Amount of Each Receipt this Period 4192.94
FEC ID number of contributing federal political committee. C C00566075		CONTRIBUTION	
Name of Employer	Occupation	TRANSFER OF JOINT FUNDRAISING PROCEEDS. SEE ATTRIBUTION BELOW	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4192.94		

Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014	
Mailing Address 320 FIRST STREET, S.E.		Transaction ID : SA12.2885	
City WASHINGTON	State DC	Zip Code 20003-1838	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00075820		CONTRIBUTION	
Name of Employer	Occupation	[MEMO ITEM] ATTRIBUTION OF JOINT FUNDRAISING COMMITTEE TRANSFER.	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	4192.94
TOTAL This Period (last page this line number only).....	6250.62

**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 203 OF 280
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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 WICKERS GROUP

Mailing Address 1819 POLK STREET
#373

City SAN FRANCISCO State CA Zip Code 94109

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
46750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA14.853

Amount of Each Receipt this Period
 46750.00

REFUND OF OVER BUY FOR TELEVISION AD

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).....

46750.00

46750.00

**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 204 OF 280	
	<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. SECOND DISTRICT REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 2337 MARTHA DRIVE		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.I789
City CONWAY State AR Zip Code 72032	Purpose of Disbursement BBQUE REGISTRATION FEE	
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 08 / 10 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.I803
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement REIMBURSEMENT - FOOD AND BEVERAGES 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:		

Full Name (Last, First, Middle Initial) C. MARY ASHLEIGH BIERBAUM		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 123.79 Transaction ID : SB17.I810
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement REIMBURSEMENT - FUNDRAISING EVENT SUPPLIES	
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).....	573.79
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 205 OF 280	
	<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 07 / 15 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I945
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 07 / 31 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I946
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. MARY ASHLEIGH BIERBAUM		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I947
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 206 OF 280	
	<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 08 / 29 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I948
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 09 / 15 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I949
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. MARY ASHLEIGH BIERBAUM		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2010 REBSAMEN PARK ROAD #110		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I950
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 207 OF 280			
	<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. CORY COX			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 112 CORONDELET LANE			Amount of Each Disbursement this Period 269.73	
City MAUMELLE	State AR	Zip Code 72113-	Transaction ID : SB17.2477	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type		
Candidate Name			IN-KIND FOOD AND BEVERAGES FOR FUNDRAISER	
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. HOUSTON DOWNES			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 62 CARMEL DRIVE			Amount of Each Disbursement this Period 500.00	
City LITTLE ROCK	State AR	Zip Code 72212	Transaction ID : SB17.I799	
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 <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 07 / 27 / 2014	
Mailing Address 1401 SCOTT STREET			Amount of Each Disbursement this Period 341.93	
City LITTLE ROCK	State AR	Zip Code 72202	Transaction ID : SB17.I806	
Purpose of Disbursement REIMBURSEMENT - MILEAGE		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).....	1111.66
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 208 OF 280	
	<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 09 / 08 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 198.00 Transaction ID : SB17.I854
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement REIMBURSEMENT - MILEAGE	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. ISAAC FOLEY		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I951
City LITTLE ROCK	State AR	
Zip Code 72202	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 <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 07 / 31 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I952
City LITTLE ROCK	State AR	
Zip Code 72202	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 <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2698.00
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 209 OF 280	
	<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 08 / 15 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I953
City LITTLE ROCK	State AR	
Zip Code 72202	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 <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 08 / 29 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I954
City LITTLE ROCK	State AR	
Zip Code 72202	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 <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 09 / 15 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I955
City LITTLE ROCK	State AR	
Zip Code 72202	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 <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 210 OF 280	
	<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 09 / 30 / 2014
Mailing Address 1401 SCOTT STREET		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.I956
City LITTLE ROCK	State AR	
Zip Code 72202	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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MR. JAI LAMBERT		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 9 CONNELL DRIVE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.2322
City LITTLE ROCK	State AR	
Zip Code 72205-1507	Purpose of Disbursement IN-KIND CONTRIBUTION	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:	IN-KIND CONTRIBUTION OF GRAPHIC DESIGN SERVICES

Full Name (Last, First, Middle Initial) C. CATHERINE L LANIER		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 36.42 Transaction ID : SB17.I855
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement REIMBURSEMENT - FOOD AND BEVERAGES	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).....	1786.42
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 211 OF 280	
	<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 07 / 15 / 2014	
Mailing Address 3901 FOXCROFT ROAD			Amount of Each Disbursement this Period 1750.00	
City LITTLE ROCK	State AR	Zip Code 72227	Transaction ID : SB17.I957	
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. CATHERINE L LANIER			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 3901 FOXCROFT ROAD			Amount of Each Disbursement this Period 1750.00	
City LITTLE ROCK	State AR	Zip Code 72227	Transaction ID : SB17.I958	
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. CATHERINE L LANIER			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 3901 FOXCROFT ROAD			Amount of Each Disbursement this Period 1750.00	
City LITTLE ROCK	State AR	Zip Code 72227	Transaction ID : SB17.I959	
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).....	5250.00
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 212 OF 280	
	<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 08 / 29 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.I960
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. CATHERINE L LANIER		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.I961
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) C. CATHERINE L LANIER		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3901 FOXCROFT ROAD		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.I962
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)	

SUBTOTAL of Disbursements This Page (optional).....	5250.00
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 213 OF 280	
	<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 07 / 15 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I939
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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I940
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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I941
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 <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11250.00
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 214 OF 280	
	<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 08 / 29 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I942
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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I943
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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JACK E SISSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 49 HICKORY HILLS DRIVE		Amount of Each Disbursement this Period 3750.00 Transaction ID : SB17.I944
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 <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11250.00
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 215 OF 280	
	<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. PATRICK STEELE		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 460 BAHAMA DRIVE		Amount of Each Disbursement this Period 876.35 Transaction ID : SB17.I814
City INDIALANTIC	State FL	
Zip Code 32903	Purpose of Disbursement REIMBURSEMENT - MILEAGE	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. EDWARD THOMPSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 321 LILLIAN STREET		Amount of Each Disbursement this Period 268.43 Transaction ID : SB17.I793
City BENTON	State AR	
Zip Code 72015	Purpose of Disbursement REIMBURSEMENT - MILEAGE	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. EDWARD THOMPSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 321 LILLIAN STREET		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I800
City BENTON	State AR	
Zip Code 72015	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 <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	876.35
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 216 OF 280	
	<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. EDWARD THOMPSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 321 LILLIAN STREET		Amount of Each Disbursement this Period 204.96 Transaction ID : SB17.I813
City BENTON State AR Zip Code 72015	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) B. EDWARD THOMPSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 321 LILLIAN STREET		Amount of Each Disbursement this Period 115.92 Transaction ID : SB17.I819
City BENTON State AR Zip Code 72015	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. ADVANCE PRINT SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 4201 S. SHACKLEFORD SUITE C		Amount of Each Disbursement this Period 3985.69 Transaction ID : SB17.I797
City LITTLE ROCK State AR Zip Code 72204	Purpose of Disbursement ENVELOPES/STATIONARY/INVITATIONS/DONATION CARDS	
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).....	4306.57
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 217 OF 280	
	<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

Mailing Address 4201 S. SHACKLEFORD SUITE C

City LITTLE ROCK State AR Zip Code 72204

Purpose of Disbursement ENVELOPES/INVITATION/STATIONARY/LETTERHEAD

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 05 / 2014

Amount of Each Disbursement this Period: 1589.48

Transaction ID : SB17.I805

Full Name (Last, First, Middle Initial)
B. ADVANCE PRINT SOLUTIONS

Mailing Address 4201 S. SHACKLEFORD SUITE C

City LITTLE ROCK State AR Zip Code 72204

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 01 / 2014

Amount of Each Disbursement this Period: 1174.93

Transaction ID : SB17.I859

Full Name (Last, First, Middle Initial)
C. ADVANCE PRINT SOLUTIONS

Mailing Address 4201 S. SHACKLEFORD SUITE C

City LITTLE ROCK State AR Zip Code 72204

Purpose of Disbursement INVITATIONS, ENVELOPES, STATIONARY

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 18 / 2014

Amount of Each Disbursement this Period: 1359.16

Transaction ID : SB17.I901

SUBTOTAL of Disbursements This Page (optional) 4123.57

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 218 OF 280			
	<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. AIR CHARTER TEAM

Mailing Address 4151 NORTH MULBERRY DRIVE #250

City KANSAS CITY State MO Zip Code 64116

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2014

Amount of Each Disbursement this Period: 2755.29

Transaction ID : SB17.I908

Full Name (Last, First, Middle Initial)
B. AMERICAN EXPRESS

Mailing Address 3 WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

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: 07 / 01 / 2014

Amount of Each Disbursement this Period: 7.95

Transaction ID : SB17.I975

Full Name (Last, First, Middle Initial)
C. BRIDGE MAJORITY

Mailing Address 2 WEST WINDSOR AVENUE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement CONSULTING - FUNDRAISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 28 / 2014

Amount of Each Disbursement this Period: 308.71

Transaction ID : SB17.I898

SUBTOTAL of Disbursements This Page (optional) 3071.95

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 219 OF 280	
	<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. BRIDGE MAJORITY		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 2 WEST WINDSOR AVENUE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I899
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) B. BRIDGE MAJORITY		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 2 WEST WINDSOR AVENUE		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.I910
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. BRYANT CHAMER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 109 ROYA LANE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.I907
City BRYANT State AR Zip Code 72022	Purpose of Disbursement ADVERTISING - TAILGATING BOOTH	
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).....	5200.00
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 220 OF 280	
	<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. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I892
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:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I893
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:		

Full Name (Last, First, Middle Initial) C. CAMPAIGN MAIL & DATA, INC. DBA CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I981
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).....	2394.00
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 221 OF 280			
	<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 08 / 25 / 2014	
Mailing Address 721 WEST 9TH STREET			Amount of Each Disbursement this Period 81.75	
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I790	
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 09 / 18 / 2014	
Mailing Address 721 WEST 9TH STREET			Amount of Each Disbursement this Period 88.66	
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I904	
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. CAPITAL HOTEL			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address 111 WEST MARKHAM			Amount of Each Disbursement this Period 2049.26	
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I791	
Purpose of Disbursement FUNDRAISING EVENT - ROOM RENTAL/FOOD/BEVERAGES		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).....	2219.67
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 222 OF 280	
	<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. CARPENTER HOTEL GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 600 INTERSTATE 30		Amount of Each Disbursement this Period 915.00 Transaction ID : SB17.I817
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement MEET AND GREET - RENTAL/FOOD/BEVERAGES	
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. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		Amount of Each Disbursement this Period 106.32 Transaction ID : SB17.I794
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement INTERNET AND CABLE SERVICES	
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. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		Amount of Each Disbursement this Period 106.32 Transaction ID : SB17.I811
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement INTERET AND CABLE SERVICES	
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).....	915.00
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 223 OF 280	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 1701 JOHN F KENNEDY BOULEVARD		Amount of Each Disbursement this Period 109.32
City PHILADELPHIA	State PA	
Zip Code 19103	Purpose of Disbursement INTERNET AND CABLE SERVICES	Transaction ID : SB17.I900
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. CRESTVIEW PROPERTIES, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 3700 KAVANAUGH BOULEVARD SUITE A		Amount of Each Disbursement this Period 1200.00
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement RENT	Transaction ID : SB17.I792
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. CRESTVIEW PROPERTIES, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 3700 KAVANAUGH BOULEVARD SUITE A		Amount of Each Disbursement this Period 1200.00
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement RENT	Transaction ID : SB17.I809
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).....	2509.32
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 224 OF 280	
	<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. CRESTVIEW PROPERTIES, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 3700 KAVANAUGH BOULEVARD SUITE A			Amount of Each Disbursement this Period 1200.00	
City LITTLE ROCK	State AR	Zip Code 72205	Transaction ID : SB17.I906	
Purpose of Disbursement RENT		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. DIRECT MAIL SYSTEMS			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014	
Mailing Address 12450 AUTOMOBILE BOULEVARD			Amount of Each Disbursement this Period 2780.30	
City CLEARWATER	State FL	Zip Code 33762	Transaction ID : SB17.I815	
Purpose of Disbursement DIRECT MAIL 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. DIRECT MAIL SYSTEMS			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014	
Mailing Address 12450 AUTOMOBILE BOULEVARD			Amount of Each Disbursement this Period 2909.28	
City CLEARWATER	State FL	Zip Code 33762	Transaction ID : SB17.I905	
Purpose of Disbursement DIRECT MAIL 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).....	6889.58
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 225 OF 280	
	<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. 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 GOTV PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 1046.92

Transaction ID : SB17.I909

B. JAI LAMBERT

Full Name (Last, First, Middle Initial)
Mailing Address 9 CONNELL DRIVE

City LITTLE ROCK State AR Zip Code 72205

Purpose of Disbursement PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 24 / 2014

Amount of Each Disbursement this Period: 2300.00

Transaction ID : SB17.I788

C. JPMS COX

Full Name (Last, First, Middle Initial)
Mailing Address 11300 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72212

Purpose of Disbursement ACCOUNTING/COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 20950.00

Transaction ID : SB17.I567

SUBTOTAL of Disbursements This Page (optional) 24296.92

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 226 OF 280	
	<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. JPMS COX		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 11300 CANTRELL ROAD		Amount of Each Disbursement this Period 685.00 Transaction ID : SB17.I807
City LITTLE ROCK State AR Zip Code 72212	Purpose of Disbursement ACCOUNTING/COMPLIANCE SERVICES	
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. JPMS COX		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 11300 CANTRELL ROAD		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.I903
City LITTLE ROCK State AR Zip Code 72212	Purpose of Disbursement ACCOUNTING/COMPLIANCE SERVICES	
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. JPMS COX		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 11300 CANTRELL ROAD		Amount of Each Disbursement this Period 3950.00 Transaction ID : SB17.I911
City LITTLE ROCK State AR Zip Code 72212	Purpose of Disbursement ACCOUNTING/COMPLIANCE SERVICES	
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).....	5185.00
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 227 OF 280			
	<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. LSC MARKETING			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014		
Mailing Address 2207 CANTRELL ROAD			Amount of Each Disbursement this Period 184.45		
City LITTLE ROCK	State AR	Zip Code 72202	Transaction ID : SB17.I820		
Purpose of Disbursement ADVERTISING - PAPER FANS		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. MITCHELL WILLIAMS LAW			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014		
Mailing Address 425 WEST CAPITOL AVENUE			Amount of Each Disbursement this Period 174.02		
City LITTLE ROCK	State AR	Zip Code 72201	Transaction ID : SB17.I808		
Purpose of Disbursement LEGAL 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. OFFICE DEPOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014		
Mailing Address 2600 CANTRELL ROAD			Amount of Each Disbursement this Period 34.39		
City LITTLE ROCK	State AR	Zip Code 72202	Transaction ID : SB17.I845		
Purpose of Disbursement OFFICE 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)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	358.47
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 228 OF 280			
	<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

Mailing Address 911 PANORAMA TRAIL SOUTH

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 15 / 2014

Amount of Each Disbursement this Period: 669.52

Transaction ID : SB17.I963

B. Full Name (Last, First, Middle Initial)
PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC

Mailing Address 911 PANORAMA TRAIL SOUTH

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 669.52

Transaction ID : SB17.I964

C. Full Name (Last, First, Middle Initial)
PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC

Mailing Address 911 PANORAMA TRAIL SOUTH

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 669.52

Transaction ID : SB17.I965

SUBTOTAL of Disbursements This Page (optional) 2008.56

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 229 OF 280	
	<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. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 669.52	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES Category/Type	Transaction ID : SB17.I966	
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. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 669.52	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES Category/Type	Transaction ID : SB17.I967	
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. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 666.52	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL TAXES Category/Type	Transaction ID : SB17.I968	
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).....	2005.56
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 230 OF 280	
	<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. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 76.00	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL SERVICE CHARGE Category/Type	Transaction ID : SB17.I969	
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:	State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 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 Category/Type	Transaction ID : SB17.I970	
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:	State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX INVESTMENT PARTNERSHIP, LP DBA PAYCHEX OF NEW YORK, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 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 Category/Type	Transaction ID : SB17.I971	
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:	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	206.00
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 231 OF 280	
	<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 08 / 29 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 65.00 Transaction ID : SB17.I972	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL SERVICE CHARGE 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)	
Candidate Name State: District:		State: District:	

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 09 / 15 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 65.00 Transaction ID : SB17.I973	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL SERVICE CHARGE 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)	
Candidate Name State: District:		State: District:	

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 09 / 30 / 2014	
Mailing Address 911 PANORAMA TRAIL SOUTH		Amount of Each Disbursement this Period 65.00 Transaction ID : SB17.I974	
City ROCHESTER State NY Zip Code 14625	Purpose of Disbursement PAYROLL SERVICE CHARGE 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)	
Candidate Name State: District:		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	65.00

**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 232 OF 280	
	<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. PCS MARKETING GROUP, L.L.C.		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 2534 COMMERCE BLVD.		Amount of Each Disbursement this Period 5165.45
City CINCINNATI	State OH	
Zip Code 45241	Purpose of Disbursement YARD SIGNS AND 4X4 SIGNS	Transaction ID : SB17.I801
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. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address P.O. BOX 26466		Amount of Each Disbursement this Period 108.59
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I976
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]
State: District:		

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address P.O. BOX 26466		Amount of Each Disbursement this Period 127.59
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I977
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).....	5293.04
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 233 OF 280			
	<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. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address P.O. BOX 26466			Amount of Each Disbursement this Period 0.58 Transaction ID : SB17.I978
City LITTLE ROCK	State AR	Zip Code 72221	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		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. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address P.O. BOX 26466			Amount of Each Disbursement this Period 73.39 Transaction ID : SB17.I979
City LITTLE ROCK	State AR	Zip Code 72221	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		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. RAISE THE MONEY, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address P.O. BOX 26466			Amount of Each Disbursement this Period 72.75 Transaction ID : SB17.I980
City LITTLE ROCK	State AR	Zip Code 72221	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		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).....	146.75
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 234 OF 280	
	<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		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address P.O. BOX 600254		Amount of Each Disbursement this Period 3190.48 Transaction ID : SB17.I858
City DALLAS State TX Zip Code 75360	Purpose of Disbursement ADVERTISING - INTERNET AND DIGITAL CONSULTING	
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. RED RIGHT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address P.O. BOX 600254		Amount of Each Disbursement this Period 1560.00 Transaction ID : SB17.I902
City DALLAS State TX Zip Code 75360	Purpose of Disbursement ADVERTISING - INTERNET AND DIGITAL CONSULTING	
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. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 3664.52 Transaction ID : SB17.I1011
City TULSA State OK Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEMS	
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).....	8415.00
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 235 OF 280	
	<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. ACE HARDWARE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address CANTRELL		Amount of Each Disbursement this Period 22.85
City LITTLE ROCK	State AR Zip Code 72223	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I1029
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 52.43
City DFW AIRPORT	State TX Zip Code 75261	
Purpose of Disbursement TRAVEL	Category/Type	Transaction ID : SB17.I1014
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 62.40
City DFW AIRPORT	State TX Zip Code 75261	
Purpose of Disbursement TRAVEL INSURANCE	Category/Type	Transaction ID : SB17.I1015
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
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 236 OF 280	
	<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 07 / 17 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 946.00
City DFW AIRPORT	State TX Zip Code 75261	
Purpose of Disbursement TRAVEL	Category/Type	Transaction ID : SB17.I1016
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 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	Transaction ID : SB17.I1017
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. HOLIDAY INN PRESIDENTIAL LITTLE ROCK		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 600 INTERSTATE 30		Amount of Each Disbursement this Period 702.36
City LITTLE ROCK	State AR Zip Code 72202	
Purpose of Disbursement TRAVEL	Category/Type	Transaction ID : SB17.I1033
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
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 237 OF 280	
	<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. INSTANT IMPRINTS		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 200 NORTH BOWMAN ROAD #10		Amount of Each Disbursement this Period 664.90
City LITTLE ROCK	State AR Zip Code 72211	
Purpose of Disbursement PRINTING	Candidate Name	Transaction ID : SB17.I1032
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 36.48
City LITTLE ROCK	State AR Zip Code 72202	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I1019
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 41.41
City LITTLE ROCK	State AR Zip Code 72202	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I1020
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

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 238 OF 280	
	<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 07 / 17 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 525.97
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1021
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 1.64
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1028
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. R K SHOWS		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 1574 255TH ST		Amount of Each Disbursement this Period 56.00
City MANCHESTER	State IA	
Zip Code 52057	Purpose of Disbursement EVENT REGISTRATION FEE	Transaction ID : SB17.I1025
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 7/17/14
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 239 OF 280	
	<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. REPUBLICAN PARTY OF ARKANSAS		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 1201 WEST 6TH STREET		Amount of Each Disbursement this Period 52.00
City LITTLE ROCK	State AR Zip Code 72201	
Purpose of Disbursement EVENT REGISTRATION FEE	Candidate Name	Transaction ID : SB17.I1023
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) B. TARGET		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 420 S UNIVERSITY		Amount of Each Disbursement this Period 36.58
City LITTLE ROCK	State AR Zip Code 72205	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I1022
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) C. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 5.80
City LITTLE ROCK	State AR Zip Code 72207	
Purpose of Disbursement POSTAGE	Candidate Name	Transaction ID : SB17.I1013
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

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 240 OF 280	
	<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 POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 170.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1018
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 9.66
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1024
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 19.60
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1026
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 7/17/14
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 241 OF 280	
	<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 MM / DD / YYYY 07 / 17 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 21.80
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1012
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement MM / DD / YYYY 07 / 17 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 60.96
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1027
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement MM / DD / YYYY 07 / 17 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 54.33
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I1030
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 7/17/14
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 242 OF 280			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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 07 / 17 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 66.20
City LITTLE ROCK	State AR Zip Code 72202	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I1031
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 4977.44
City TULSA	State OK Zip Code 74121	
Purpose of Disbursement CREDIT CARD PAYMENT -SEE MEMO ITEMS	Category/Type	Transaction ID : SB17.I795
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 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	Transaction ID : SB17.I839
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4977.44
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 243 OF 280	
	<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. CHICK-FIL-A		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 6201 WEST MARKHAM STREET		Amount of Each Disbursement this Period 0.00
City LITTLE ROCK	State AR Zip Code 72205	
Purpose of Disbursement FOOD	Category/Type	Transaction ID : SB17.I843
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 161.00
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement AIRFARE	Category/Type	Transaction ID : SB17.I840
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 161.00
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement AIRFARE	Category/Type	Transaction ID : SB17.I841
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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 244 OF 280			
	<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. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 231.60
City ATLANTA	State GA Zip Code 30320	
Purpose of Disbursement AIRFARE	Candidate Name	Transaction ID : SB17.I846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14

Full Name (Last, First, Middle Initial) B. HYATT REGENCY WASHINGTON ON CAPITOL HILL		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 400 NEW JERSEY AVENUE, N.W.		Amount of Each Disbursement this Period 1029.34
City WASHINGTON	State DC Zip Code 20001	
Purpose of Disbursement LODGING/HOTEL	Candidate Name	Transaction ID : SB17.I852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14

Full Name (Last, First, Middle Initial) C. INSTANT IMPRINTS		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 200 NORTH BOWMAN ROAD #10		Amount of Each Disbursement this Period 1142.32
City LITTLE ROCK	State AR Zip Code 72211	
Purpose of Disbursement ADVERTISING - PAPER FANS	Candidate Name	Transaction ID : SB17.I848
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14

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 245 OF 280	
	<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. MCDONALD'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 7721 CANTRELL ROAD		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.I836
City LITTLE ROCK	State AR	
Zip Code 72227	Purpose of Disbursement FOOD AND BEVERAGES	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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. OBRYCKI'S RESTAURANT AND BAR		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1 BWI AIRPORT		Amount of Each Disbursement this Period 24.04 Transaction ID : SB17.I850
City BALTIMORE	State MD	
Zip Code 21240	Purpose of Disbursement FOOD AND BEVERAGES	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 493.04 Transaction ID : SB17.I982
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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).....	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 246 OF 280	
	<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. OZARK COUNTRY RESTAURANT

Mailing Address 201 KEIGHTLY DRIVE

City LITTLE ROCK State AR Zip Code 72207

Purpose of Disbursement
FOOD AND BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 27.46

Transaction ID : SB17.I851

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 8/17/14

Full Name (Last, First, Middle Initial)
B. SOUTHWEST AIRLINES

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 10 / 2014

Amount of Each Disbursement this Period: 574.00

Transaction ID : SB17.I842

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 8/17/14

Full Name (Last, First, Middle Initial)
C. SOUTHWEST AIRLINES

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 23 / 2014

Amount of Each Disbursement this Period: 442.10

Transaction ID : SB17.I847

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 8/17/14

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 247 OF 280	
	<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. TAXI MAGIC		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 5904 RICHMOND HIGHWAY		Amount of Each Disbursement this Period 16.35
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement TRANSPORTATION	Transaction ID : SB17.I849
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. TRIVIA MARKETING		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1100 W. MARKHAM STREET		Amount of Each Disbursement this Period 531.92
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement CAMPAIGN T-SHIRTS	Transaction ID : SB17.I837
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 7.99
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I838
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 8/17/14
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 248 OF 280	
	<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 07 / 21 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 34.29
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I844
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 1284.07
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT -SEE MEMO ITEMS	Transaction ID : SB17.I796
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. AIRPORT PARKING		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1 AIRPORT DRIVE		Amount of Each Disbursement this Period 40.75
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement PARKING	Transaction ID : SB17.I831
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 8/17/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1284.07
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 249 OF 280	
	<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. AMTRACK DC		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 201 I STREET NE		Amount of Each Disbursement this Period 18.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I830
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. AMTRACK DC		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 201 I STREET NE		Amount of Each Disbursement this Period 18.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I832
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. ARKANSAS OUTDOORS EXPO		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 1625 BUCKHORN CIRCLE		Amount of Each Disbursement this Period 10.00
City CONWAY	State AR	
Zip Code 72034	Purpose of Disbursement EXPO TICKET	Transaction ID : SB17.I828
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 8/17/14
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 250 OF 280	
	<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. BRANDON BURLSWORTH FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 119 WEST CENTRAL			Amount of Each Disbursement this Period 200.00	
City HARRISON	State AR	Zip Code 72601	Transaction ID : SB17.I834 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14	
Purpose of Disbursement TICKET FOR EVENT		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. EXXON MOBIL			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address 119 CARNAHAN DRIVE			Amount of Each Disbursement this Period 100.00	
City MAUMELLE	State AR	Zip Code 72113	Transaction ID : SB17.I826 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14	
Purpose of Disbursement TRAVEL		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. FACEBOOK ADVERTISING			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 1601 WILLOW ROAD			Amount of Each Disbursement this Period 521.58	
City MENLO PARK	State CA	Zip Code 94025	Transaction ID : SB17.I822 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14	
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)			
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 251 OF 280			
	<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		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 26.06
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement INTERNET ADVERTISING	
Candidate Name	Category/Type	Transaction ID : SB17.I827 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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. MCDONALD'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address HIGHWAY 65 SOUTH		Amount of Each Disbursement this Period 13.32
City CLINTON State AR Zip Code 72031	Purpose of Disbursement FOOD AND BEVERAGES	
Candidate Name	Category/Type	Transaction ID : SB17.I823 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 3.22
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I833 [MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
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).....	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 252 OF 280	
	<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 MM / DD / YYYY 08 / 04 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 258.89
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I835
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL OIL		Date of Disbursement MM / DD / YYYY 07 / 21 / 2014
Mailing Address 5801 R STREET		Amount of Each Disbursement this Period 40.00
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I829
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 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. SONIC, AMERICA'S DRIVE-IN		Date of Disbursement MM / DD / YYYY 07 / 07 / 2014
Mailing Address 6250 HEBER SPRINGS ROAD W		Amount of Each Disbursement this Period 18.45
City QUITMAN	State AR	
Zip Code 72131	Purpose of Disbursement FOOD AND BEVERAGES	Transaction ID : SB17.I825
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 8/17/14
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 253 OF 280	
	<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 FULL MOON		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 3625 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 15.80
City LITTLE ROCK	State AR Zip Code 72205	
Purpose of Disbursement FUNDRAISING EVENT SUPPLIES	Category/Type	Transaction ID : SB17.I824
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 6657.39
City TULSA	State OK Zip Code 74121	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMO ITEMS	Category/Type	Transaction ID : SB17.I864
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 8/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. ARKANSAS STATE CHAMBER OF COMMERCE		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 1200 WEST CAPITOL AVENUE		Amount of Each Disbursement this Period 150.00
City LITTLE ROCK	State AR Zip Code 72201	
Purpose of Disbursement EVENT TICKETS	Category/Type	Transaction ID : SB17.I881
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)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 9/17/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6657.39
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 254 OF 280	
	<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. COBBLESTONE AND VINE

Full Name (Last, First, Middle Initial)
Mailing Address 2314 CANTRELL ROAD

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement
FUNDRAISING EVENT SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 43.60

Transaction ID : SB17.I883

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

B. E-Z MART

Full Name (Last, First, Middle Initial)
Mailing Address 2804 KAVANAUGH BLVD

City LITTLE ROCK State AR Zip Code 72205

Purpose of Disbursement
BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 04 / 2014

Amount of Each Disbursement this Period: 11.65

Transaction ID : SB17.I888

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 9/17/14

C. FACEBOOK ADVERTISING

Full Name (Last, First, Middle Initial)
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: 08 / 12 / 2014

Amount of Each Disbursement this Period: 752.37

Transaction ID : SB17.I870

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

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 255 OF 280			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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: 08 / 18 / 2014

Amount of Each Disbursement this Period: 752.42

Transaction ID : SB17.I875

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

Full Name (Last, First, Middle Initial)
B. 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: 08 / 29 / 2014

Amount of Each Disbursement this Period: 750.28

Transaction ID : SB17.I884

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 9/17/14

Full Name (Last, First, Middle Initial)
C. 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: 09 / 01 / 2014

Amount of Each Disbursement this Period: 117.67

Transaction ID : SB17.I885

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 9/17/14

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 256 OF 280	
	<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: 09 / 01 / 2014

Amount of Each Disbursement this Period: 117.67

Transaction ID : SB17.I886

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

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: 08 / 11 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I869

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

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: 08 / 18 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.I874

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

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 257 OF 280	
	<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		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING - INTERNET	
Candidate Name	Category/Type	Transaction ID : SB17.I882
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. GOOGLE ADS		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING - INTERNET	
Candidate Name	Category/Type	Transaction ID : SB17.I983
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. GOOGLE ADS		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING - INTERNET	
Candidate Name	Category/Type	Transaction ID : SB17.I984
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).....	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 258 OF 280	
	<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. JACKSONVILLE CHAMBER OF COMMERCE			Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 200 DUPREE DRIVE			Amount of Each Disbursement this Period 110.00
City JACKSONVILLE	State AR	Zip Code 72076	
Purpose of Disbursement EVENT TICKETS		Candidate Name	Transaction ID : SB17.I877
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)		Category/Type	[MEMO ITEM]
State:	District:		ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

Full Name (Last, First, Middle Initial) B. KROGER			Date of Disbursement MM / DD / YYYY 09 / 18 / 2014
Mailing Address 14000 CANTRELL RD			Amount of Each Disbursement this Period 8.47
City LITTLE ROCK	State AR	Zip Code 72223	
Purpose of Disbursement FOOD		Candidate Name	Transaction ID : SB17.I873
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)		Category/Type	[MEMO ITEM]
State:	District:		ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

Full Name (Last, First, Middle Initial) C. LITTLE CAESARS PIZZA			Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 7509 CANTRELL ROAD			Amount of Each Disbursement this Period 15.04
City LITTLE ROCK	State AR	Zip Code 72207	
Purpose of Disbursement FOOD		Candidate Name	Transaction ID : SB17.I871
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)		Category/Type	[MEMO ITEM]
State:	District:		ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

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 260 OF 280	
	<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 08 / 21 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 245.00
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I880
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 DISBURSEMENT 9/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 245.00
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I890
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 9/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 566.31
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement POSTAGE AND OFFICE SUPPLIES	Transaction ID : SB17.I891
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 DISBURSEMENT 9/17/14
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 261 OF 280	
	<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 POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 9,999.99 3.41
City LITTLE ROCK State AR Zip Code 72207	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I878
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:		[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 9,999.99 60.78
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.I889
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:		[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 9/17/14

Full Name (Last, First, Middle Initial) C. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 9,999.99 9535.84
City TULSA State OK Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT -SEE MEMO ITEMS	
Candidate Name	Category/Type	Transaction ID : SB17.I912
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).....	9535.84
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 262 OF 280	
	<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 REBAR		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1222 AIRLANE		Amount of Each Disbursement this Period 365.15
City BENTON	State AR Zip Code 72015	
Purpose of Disbursement SIGN SUPPLIES	Candidate Name	Transaction ID : SB17.I924
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) B. FACEBOOK ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1601 WILLOW ROAD		Amount of Each Disbursement this Period 294.63
City MENLO PARK	State CA Zip Code 94025	
Purpose of Disbursement ADVERTISING - INTERNET	Candidate Name	Transaction ID : SB17.I1034
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 9/30/14

Full Name (Last, First, Middle Initial) C. FACEBOOK ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1601 WILLOW ROAD		Amount of Each Disbursement this Period 751.13
City MENLO PARK	State CA Zip Code 94025	
Purpose of Disbursement ADVERTISING - INTERNET	Candidate Name	Transaction ID : SB17.I920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 9/30/14

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 263 OF 280	
	<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
M M / D D / Y Y Y Y
09 / 22 / 2014

Amount of Each Disbursement this Period
751.35

Transaction ID : SB17.I930

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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
M M / D D / Y Y Y Y
09 / 10 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : SB17.I921

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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
M M / D D / Y Y Y Y
09 / 17 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : SB17.I926

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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 264 OF 280	
	<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		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING - INTERNET	
Candidate Name		Transaction ID : SB17.I932
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	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 9/30/14

Full Name (Last, First, Middle Initial) B. GOOGLE ADS		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING - INTERNET	
Candidate Name		Transaction ID : SB17.I935
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	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 14.61
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement POSTAGE	
Candidate Name		Transaction ID : SB17.I929
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	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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 265 OF 280	
	<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 09 / 29 / 2014
Mailing Address 2600 CANTRELL ROAD		Amount of Each Disbursement this Period 61.40
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement ADVERTISING - INTERNET	Transaction ID : SB17.I934
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 DISBURSEMENT 9/30/14
State: District:		

Full Name (Last, First, Middle Initial) B. PANERA BREAD		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 11525 CANTRELL ROAD		Amount of Each Disbursement this Period 61.23
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement FOOD AND BEVERAGES	Transaction ID : SB17.I919
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 DISBURSEMENT 9/30/14
State: District:		

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address P.O. BOX 36647-1CR		Amount of Each Disbursement this Period 362.20
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I925
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 DISBURSEMENT 9/30/14
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 266 OF 280	
	<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)		Date of Disbursement
A. TARGETED ENGAGEMENT ADVERTISING		M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1033 NORTH FAIRFAX STREET		Amount of Each Disbursement this Period
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ADVERTISING - INTERNET	Category/Type	
Candidate Name	Transaction ID : SB17.I923	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	[MEMO ITEM]
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. TARGETED ENGAGEMENT ADVERTISING		M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1033 NORTH FAIRFAX STREET		Amount of Each Disbursement this Period
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement ADVERTISING - INTERNET	Category/Type	
Candidate Name	Transaction ID : SB17.I933	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	[MEMO ITEM]
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. UNITED AIRLINES		M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 233 SOUTH WACKER DRIVE		Amount of Each Disbursement this Period
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Transaction ID : SB17.I927	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	[MEMO ITEM]
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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 267 OF 280	
	<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. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 233 SOUTH WACKER DRIVE		Amount of Each Disbursement this Period 694.70
City CHICAGO	State IL Zip Code 60606	
Purpose of Disbursement AIRFARE	Candidate Name	Transaction ID : SB17.I928
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address FOREST PARK STATION		Amount of Each Disbursement this Period 34.90
City LITTLE ROCK	State AR Zip Code 72207	
Purpose of Disbursement POSTAGE	Candidate Name	Transaction ID : SB17.I918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) C. US POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 11.90
City LITTLE ROCK	State AR Zip Code 72207	
Purpose of Disbursement POSTAGE	Candidate Name	Transaction ID : SB17.I931
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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 268 OF 280	
	<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 POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 166.99
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I936
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 DISBURSEMENT 9/30/14
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 2510 CANTRELL ROAD		Amount of Each Disbursement this Period 30.95
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I917
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 DISBURSEMENT 9/30/14
State: District:		

Full Name (Last, First, Middle Initial) C. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 155.68
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT -SEE MEMO ITEMS	Transaction ID : SB17.I913
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).....	155.68
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 269 OF 280	
	<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. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 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	
Candidate Name		Transaction ID : SB17.I914
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	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) B. BRAVE NEW RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 2300 COTTONDALE LANE SUITE 105		Amount of Each Disbursement this Period 85.49
City LITTLE ROCK State AR Zip Code 72202	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name		Transaction ID : SB17.I1035
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	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

Full Name (Last, First, Middle Initial) C. LITTLE CAESARS PIZZA		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 7509 CANTRELL ROAD		Amount of Each Disbursement this Period 15.04
City LITTLE ROCK State AR Zip Code 72207	Purpose of Disbursement FOOD	
Candidate Name		Transaction ID : SB17.I915
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	[MEMO ITEM] ITEMIZED CREDIT CARD DISBURSEMENT 9/30/14

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 270 OF 280			
	<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

Mailing Address P.O. BOX 22116

City TULSA State OK Zip Code 74121

Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEMS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 17 / 2014

Amount of Each Disbursement this Period: 75.68

Transaction ID : SB17.I993

Full Name (Last, First, Middle Initial)
B. AT&T

Mailing Address 208 SOUTH AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement CELL PHONE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 08 / 2014

Amount of Each Disbursement this Period: 55.15

Transaction ID : SB17.I995

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

Full Name (Last, First, Middle Initial)
C. WAFFLE HOUSE

Mailing Address 1220 REBSAMEN PARK ROAD

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement FOOD AND BEVERAGES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 08 / 2014

Amount of Each Disbursement this Period: 20.53

Transaction ID : SB17.I994

[MEMO ITEM]
ITEMIZED CREDIT CARD DISBURSEMENT 9/17/14

SUBTOTAL of Disbursements This Page (optional) 75.68

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 271 OF 280			
	<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 07 / 17 / 2014
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 4619.87
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I996
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. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 619616 MD 5675		Amount of Each Disbursement this Period 5.43
City DFW AIRPORT	State TX	
Zip Code 75261	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1005
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. AMTRACK DC		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 201 I STREET NE		Amount of Each Disbursement this Period 12.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1007
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 7/1/14
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4619.87
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 272 OF 280	
	<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. BOMBAY CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 815 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 58.33
City WASHINGTON State DC Zip Code 20006	Purpose of Disbursement FOOD/BEVERAGE	
Candidate Name		Transaction ID : SB17.I1006
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	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) B. CAPITOL HILL SUITES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 200 C ST SE		Amount of Each Disbursement this Period 1313.33
City WAHINGTON State DC Zip Code 20003	Purpose of Disbursement TRAVEL	
Candidate Name		Transaction ID : SB17.I1008
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	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial) C. EXXON MOBIL		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 119 CARNAHAN DRIVE		Amount of Each Disbursement this Period 100.00
City MAUMELLE State AR Zip Code 72113	Purpose of Disbursement TRAVEL	
Candidate Name		Transaction ID : SB17.I1010
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	[MEMO ITEM] ITEMIZED CREDIT CARD PAMENT 7/17/14

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 273 OF 280	
	<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: 07 / 17 / 2014

Amount of Each Disbursement this Period: 299.71

Transaction ID : SB17.I1002

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial)
B. HOME PLATE DINER

Mailing Address 2615 PRICKETT RD

City BRYANT State AR Zip Code 72022

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 22.81

Transaction ID : SB17.I1000

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 7/17/14

Full Name (Last, First, Middle Initial)
C. LAZZARI ITALIAN OVEN

Mailing Address 2230 S CARAWAY RD

City JONESBORO State AR Zip Code 72401

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 381.39

Transaction ID : SB17.I1009

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 7/17/14

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 274 OF 280	
	<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. MADDIE'S PLACE		Date of Disbursement MM / DD / YYYY 07 / 17 / 2014
Mailing Address 1615 REBSAMEN PARK ROAD		Amount of Each Disbursement this Period \$ 29.25
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I999
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 17 / 2014
Mailing Address 33 BEAVER STREET		Amount of Each Disbursement this Period \$ 36.38
City NEW YORK CITY	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1001
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. NYC TAXI		Date of Disbursement MM / DD / YYYY 07 / 17 / 2014
Mailing Address 33 BEAVER STREET		Amount of Each Disbursement this Period \$ 9.25
City NEW YORK CITY	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1003
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 7/17/14
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 275 OF 280	
	<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. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 36647-1CR		Amount of Each Disbursement this Period 673.00
City DALLAS	State TX	Zip Code 75235
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I997	
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address P.O. BOX 36647-1CR		Amount of Each Disbursement this Period 933.00
City DALLAS	State TX	Zip Code 75235
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I998	
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 7/17/14
State: District:		

Full Name (Last, First, Middle Initial) C. THE ROOSEVELT HOTEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 45 EAST 45TH ST. AT MADISON AVENUE		Amount of Each Disbursement this Period 743.99
City NEW YORK CITY	State NY	Zip Code 10017
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I1004	
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 7/17/14
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 276 OF 280	
	<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 SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.I922

Full Name (Last, First, Middle Initial)
B. THE WICKERS GROUP

Mailing Address 1819 POLK STREET #373

City SAN FRANCISCO State CA Zip Code 94109

Purpose of Disbursement MEDIA BUY

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 20000.00

Transaction ID : SB17.I787

Full Name (Last, First, Middle Initial)
C. THE WICKERS GROUP

Mailing Address 1819 POLK STREET #373

City SAN FRANCISCO State CA Zip Code 94109

Purpose of Disbursement POLL, CONSULTING AND TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 12 / 2014

Amount of Each Disbursement this Period: 1758.03

Transaction ID : SB17.I798

SUBTOTAL of Disbursements This Page (optional)..... 24258.03

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 277 OF 280	
	<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 07 / 07 / 2014	
Mailing Address 1819 POLK STREET #373			Amount of Each Disbursement this Period 7750.00	
City SAN FRANCISCO	State CA	Zip Code 94109	Transaction ID : SB17.I818	
Purpose of Disbursement SURVEY RESEARCH		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. THE WICKERS GROUP			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 1819 POLK STREET #373			Amount of Each Disbursement this Period 91500.00	
City SAN FRANCISCO	State CA	Zip Code 94109	Transaction ID : SB17.I857	
Purpose of Disbursement MEDIA BUY -TELEVISION		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. THE WICKERS GROUP			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 1819 POLK STREET #373			Amount of Each Disbursement this Period 40000.00	
City SAN FRANCISCO	State CA	Zip Code 94109	Transaction ID : SB17.I860	
Purpose of Disbursement MEDIA BUY -TELEVISION		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).....	139250.00
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 278 OF 280			
	<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 09 / 04 / 2014
Mailing Address 1819 POLK STREET #373			Amount of Each Disbursement this Period 68500.00
City SAN FRANCISCO	State CA	Zip Code 94109	
Purpose of Disbursement MEDIA BUY -TELEVISION		Candidate Name	Transaction ID : SB17.I861
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)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. THE WICKERS GROUP			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 1819 POLK STREET #373			Amount of Each Disbursement this Period 180875.00
City SAN FRANCISCO	State CA	Zip Code 94109	
Purpose of Disbursement MEDIA BUY -TELEVISION		Candidate Name	Transaction ID : SB17.I862
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)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) C. THIRD DIMENSION STRATEGIES, L.L.C.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 14524 CANTRELL ROAD SUITE 140			Amount of Each Disbursement this Period 10007.55
City LITTLE ROCK	State AR	Zip Code 72223	
Purpose of Disbursement VOTER ID PHONE CALLS		Candidate Name	Transaction ID : SB17.I856
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)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	259382.55
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 279 OF 280	
	<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. US POST OFFICE

Full Name (Last, First, Middle Initial)

Mailing Address **FOREST PARK STATION**

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

Purpose of Disbursement
POST OFFICE BOX RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: **08 / 10 / 2014**

Amount of Each Disbursement this Period: **31.00**

Transaction ID : **SB17.I804**

B. REPUBLICAN PARTY OF ARKANSAS

Full Name (Last, First, Middle Initial)

Mailing Address **1201 WEST 6TH STREET**

City **LITTLE ROCK** State **AR** Zip Code **72201**

Purpose of Disbursement
STATE CONVENTION TICKETS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: **07 / 09 / 2014**

Amount of Each Disbursement this Period: **350.00**

Transaction ID : **SB17.I816**

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **381.00**

TOTAL This Period (last page this line number only) **581613.70**

**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 280 OF 280	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" 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. AKSM UROLOGY PAC		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 100 WEST 3RD AVENUE SUITE 350		Amount of Each Disbursement this Period 2000.00
City COLUMBUS State OH Zip Code 43201	Purpose of Disbursement OVER THE LIMIT REFUND	
Candidate Name	Category/Type	Transaction ID : SB20C.I812
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:		

SEE TRANSACTION SA11.1846 FROM Q2 REPORT

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	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00