

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2015 APR -3 AM 9:32
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

ADDRESS (number and street)

P.O. BOX 7878

912 SOUTH POPLAR

Check if different than previously reported. (ACC)

PINE BLUFF AR 71611 - 7878

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00278754

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MMM / DDD / YYYYYY

in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MMM / DDD / YYYYYY

in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY
07 / 01 / 2014 through 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 ANITA SHAFER - DURHAM, PAC TREASURER

Signature of Treasurer

Anita Shafer Durham PAC Treas.

Date

MM / DD / YYYY
03 / 31 / 2015

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		14,255.00
(b) Cash on Hand at Beginning of Reporting Period.....	15,155.00	
(c) Total Receipts (from Line 19)	800.00	3,200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15,955.00	17,455.00
7. Total Disbursements (from Line 31)	2,000.00	3,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13,955.00	13,955.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

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
Calendar Year-to-Date

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	800.00	3,200.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	800.00	3,200.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	800.00	3,200.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	800.00	3,200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	800.00	3,200.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

44004 1 0101 1 0000

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

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

FOR LINE NUMBER: PAGE 1 OF 3

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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)

RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Full Name (Last, First, Middle Initial)

A. COTNER, MARIE

Mailing Address

5109 DOLLARWAY ROAD

City

PINE BLUFF,

State

AR

Zip Code

71602

FEC ID number of contributing federal political committee.

C

Name of Employer

WHOLESALE TIRE CO

Occupation

SELF EMPLOYED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / **01** / **2014**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. KLINE, ANNETTEE

Mailing Address

6809 BRINKLEY ROAD

City

PINE BLUFF

State

AR

Zip Code

71603

FEC ID number of contributing federal political committee.

C

Name of Employer

STRONG MANUFACTURING

Occupation

BUSINESS OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / **01** / **2014**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. FRENCH, JENNIFER

Mailing Address

304 FISH STREET

City

STAR CITY

State

AR

Zip Code

71667

FEC ID number of contributing federal political committee.

C

Name of Employer

STAR CITY PUBLIC SCHOOLS

Occupation

TEACHER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / **01** / **2014**

Amount of Each Receipt this Period

100.00

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

300.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 1	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Full Name (Last, First, Middle Initial) A. Cotton, Tom			Date of Disbursement MM / DD / YYYY 08 / 6 / 2014		
Mailing Address P.O. Box 7504			Amount of Each Disbursement this Period 2,000.00		
City Little Rock	State AR	Zip Code 72217			
Purpose of Disbursement			Category/Type		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: AR	District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement			Category/Type		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement			Category/Type		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2,000.00
TOTAL This Period (last page this line number only).....▶	2,000.00

FROM: 450 SOUTH

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

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

FOR LINE NUMBER: PAGE 2 OF 3

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Full Name (Last, First, Middle Initial)

A. BONDS, KENNY

Mailing Address

P.O. BOX 500

City

MOSCOW

State

AR

Zip Code

71659

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 01 / 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. SANDERS, ARCHIE

Mailing Address

1208 BLAKE STREET

City

PINE BLUFF

State

AR

Zip Code

71603

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 01 / 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. GARRISON, JOHN P

Mailing Address

6207 COUNTRY LANE

City

PINE BLUFF

State

AR

Zip Code

71603

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED - RELYANCE BANK

Occupation

CEO - BANKING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 01 / 2014

Amount of Each Receipt this Period

100.00

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

300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3 OF 3		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
RELYANCE BANK POLITICAL ACTION COMMITTEE - FEDERAL

Full Name (Last, First, Middle Initial) A. DIAL, THOMAS		Date of Receipt
Mailing Address 200 WYATT ROAD		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City PINE BLUFF	State AR	Zip Code 71601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF EMPLOYED	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. JACKS, RAY		Date of Receipt
Mailing Address 5703 PLUM		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City PINE BLUFF	State AR	Zip Code 71603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation FIREMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	800.00

104001-1101-10000

OUTSIDE OF THE U.S. ONLY

FedEx
TRACKING
0215 8071 1058 7635

MON - 06 APR AA
** 2DAY **

SK RDVA

20463
DC-US
IAD



F10 954235 02APR15 LITA 522C2/8FC5/6500

Use only when using

NOM

Package
JS Airbill
8071 1058 7635

1 From Date 4/2/2015

Sender's Name ANGELA MELHORN Phone 370 535-7222

Company RELYANCE BANK, N.A.

Address 912 S POPLAR ST

City PINE BLUFF State AR ZIP 71601-4861

2 Your Internal Billing Reference

3 To Recipients Name
Company FEDERAL ELECTIONS COMMISSION
Address 999 E STREET, N.W.
City WASHINGTON State DC ZIP 20463

4 Express Package Service * To meet location.
NOTE: Service order has changed. Please select carefully.

Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight

2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver

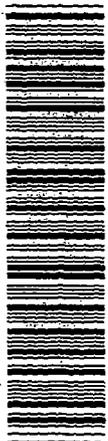
Packaging
FedEx Envelope
FedEx Pak
FedEx Box
FedEx Tube
Other

6 Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature

7 Payment Bill to:
Sender
Recipient
Third Party
Credit Card
Cash/Check

Total Packages Total Weight

05241044



8071 1058 7635

fedex.com 1800.GoFedEx 1800.463.3339

Recipient's Copy

Packages up to 150 lbs.
For packages over 150 lbs. use the
FedEx Express Freight for Adult.

Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight

2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver

Packaging
FedEx Envelope
FedEx Pak
FedEx Box
FedEx Tube
Other

6 Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature

7 Payment Bill to:
Sender
Recipient
Third Party
Credit Card
Cash/Check

Total Packages Total Weight

05241044

677

Rev. Date 2/12 - Part #103134 - ©1994-2013 FedEx - PRINTED IN U.S.A. SSM

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
4/2/15
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


 PREPARER

4/3/15
 DATE PREPARED

FUND 1011 10011