

FEC
FORM 1

STATEMENT OF ORGANIZATION

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2014 JAN 28 AM 11:52

Office Use Only

FEDERAL MAIL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Janis Kent Percefull for Congress

ADDRESS (number and street)

101 Hammond Drive Unit 3410

(Check if address is changed)

Hot Springs

CITY ▲

AR

STATE ▲

71914

3410

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

info@jkpercefullforcongress.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.jkpercefullforcongress.com

2. DATE 01 / 21 / 2014

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Janis K. Percefull (candidate)

Signature of Treasurer

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

14031163850

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Janis Kent Percefull

Candidate Party Affiliation **Independent** Office Sought: House Senate President State **Arkansas** District **4**

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/o Capital Stock Labor Organization
 Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

14031163851

Write or Type Committee Name

Janis Kent Percefull for Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Faith Samantha Sherman

Mailing Address

P. O. Box 4245

Hot Springs

AR

71914

4245

Title or Position

CITY

STATE

ZIP CODE

Bookkeeper

Telephone number

501

276

4288

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Faith Samantha Sherman

Mailing Address

P. O. Box 4245

Hot Springs

AR

71914

4245

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

501

276

4288

14031163852

Full Name of Designated Agent

Janis Kent Percefull

Mailing Address

P. O. Box 3032

Hot Springs

CITY

AR

STATE

71914

ZIP CODE

3032

Title or Position

Assistant Treasurer

Telephone number

501

767

4779

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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Summit Bank

Mailing Address

150 Airport Road

Hot Springs

CITY

AR

STATE

71913

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

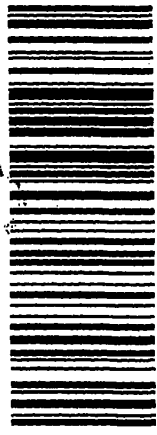
STATE

ZIP CODE

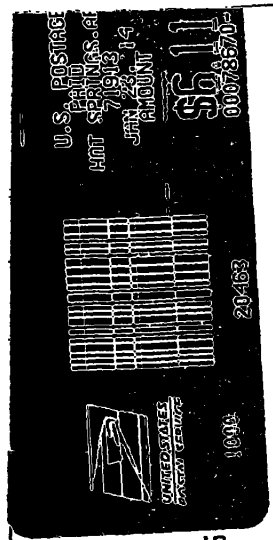
14031163854

Janis K. Percefull
P. O. Box 3032
Hot Springs, Arkansas 71914

**RETURN RECEIPT
REQUESTED**



7012 1010 0003 5695 4895

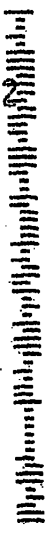


Federal Election Commission
999 E. Street N. W.
Washington, D. C. 20463

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USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
1/23/14

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No Postmark


Overnight Delivery Service (Specify): Shipping Date
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
 (8/2013)

1/23/14
 DATE PREPARED

14031163855