

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))....	263825.17	833002.61
(b) Total Contribution Refunds (from Line 20(d))	0.00	350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	263825.17	832652.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	83445.64	300633.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2015.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	83445.64	298618.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	722969.78	
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: / / To: / /

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).....	153425.00	359375.00
(ii) Unitemized.....	4070.34	10200.34
(iii) TOTAL of contributions from individuals ▶	157495.34	369575.34
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	106329.83	463427.27
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	263825.17	833002.61
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	39820.75
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.)	0.00	2015.39
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)..... ▶	263825.17	874838.75

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	83445.64	300633.90
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	350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	350.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	83445.64	300983.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	542590.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	263825.17
25. SUBTOTAL (add Line 23 and Line 24).....	806415.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	83445.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	722969.78

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

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

Mailing Address 1321 OAK STREET

City State Zip Code
CONWAY AR 72034-5338

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

Name of Employer Occupation
SELF EMPLOYED INVESTMENTS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11.3962

Amount of Each Receipt this Period
 1000.00
 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3923

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BLAIR ALLEN JR.

Mailing Address 4710 CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5436

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

Name of Employer Occupation
BEECHWOOD HOSPITALITY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.4144

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 6 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. CHARLES 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 **SCRAP METAL RECYCLING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3996

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JAN ALMAN

Mailing Address **6 RIVER OAKS CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72207-1702**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 11 / 2015

Transaction ID : SA11.3889

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LARRY ALMAN

Mailing Address **6 RIVER OAKS CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72207-1702**

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

Name of Employer **SOL ALMAN COMPANY** Occupation **SCRAP METAL RECYCLING**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.3888

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 7 OF 126
(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. DOUGLAS ASHCRAFT

Mailing Address **20 PHELLOS COURT**

City **LITTLE ROCK** State **AR** Zip Code **72223-5146**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3979

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **5610 HAWTHORNE ROAD**

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

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 11 / 2015

Transaction ID : SA11.4139

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **5610 HAWTHORNE ROAD**

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

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

Name of Employer **JOYCE BABIN, TRUSTEE** Occupation **ATTORNEY AT LAW**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 11 / 2015

Transaction ID : SA11.4137

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 8 OF 126
	<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. BRAD BALTZ

Mailing Address 9101 KANIS RD #200

City: LITTLE ROCK State: AR Zip Code: 72205-6455

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

Name of Employer: HEMATOLOGY ONCOLOGY SERVICES Occupation: PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 11 / 01 / 2015

Transaction ID : SA11.4183

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 7609

City: LITTLE ROCK State: AR Zip Code: 72217-7609

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

Name of Employer: SELF EMPLOYED Occupation: CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 10 / 09 / 2015

Transaction ID : SA11.3961

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address P.O. BOX 7609

City: LITTLE ROCK State: AR Zip Code: 72217-7609

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

Name of Employer: SELF EMPLOYED Occupation: CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 12 / 13 / 2015

Transaction ID : SA11.4122

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 9 OF 126
	<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. LINDA BEENE

Mailing Address 5205 BAYTOWN

City State Zip Code
CONWAY AR 72034-8297

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

Name of Employer Occupation
MARTIN-WILBOURN PARTNERS SENIOR VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3931

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KENNETH BENNETT

Mailing Address 4 TIMBERLAKE DRIVE

City State Zip Code
LITTLE ROCK AR 72207-1607

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

Name of Employer Occupation
STEPHENS, INC. INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3918

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 1904 SHADOW LANE

City State Zip Code
LITTLE ROCK AR 72207-2018

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

Name of Employer Occupation
MCLARTY CAPITAL PARTNERS PRIVATE EQUITY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.4132

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 126
	<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. MICHAEL D. BLANCHAT

Mailing Address 1914 NORTH SPRUCE STREET

City State Zip Code
LITTLE ROCK AR 72207-4718

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

Name of Employer Occupation
A. BRIGGS PASSPORT AND VISA EXPEDITO PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4161

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 5618 EDGEWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-5314

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

Name of Employer Occupation
STEPHENS, INC. MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.3813

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address PO BOX 7588

City State Zip Code
LITTLE ROCK AR 72217-7588

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3975

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: PAGE 11 OF 126
(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. LARRY W. BOWDEN

Mailing Address **815 BEECHWOOD STREET**

City **LITTLE ROCK** State **AR** Zip Code **72205-1903**

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

Name of Employer **STEPHENS INC.** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11.3895

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA BOYD

Mailing Address **5714 HAWTHORNE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4310**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3994

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE S. BRADBURY

Mailing Address **4 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.3990

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 126
	<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. CHARLOTTE S. BRADBURY

Mailing Address **4 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.3991

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

Mailing Address **4 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **STEPHENS INC.** Occupation **CHIEF OPERATING OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3949

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CURT BRADBURY JR.

Mailing Address **4 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **STEPHENS INC.** Occupation **CHIEF OPERATING OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3950

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

8100.00

**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 126
	<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. BRIAN WOODS BRATCHER

Mailing Address 48 RIVER ESTATE COVE

City State Zip Code
LITTLE ROCK AR 72223-2238

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.4141

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BOB G. BRAVE

Mailing Address 2719 NORTH UNIVERSITY AVENUE

City State Zip Code
LITTLE ROCK AR 72207-2738

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 27 / 2015

Transaction ID : SA11.4090

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LANEY N. BRIGGS

Mailing Address 1 LENON DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5134

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

Name of Employer Occupation
BANK OF ENGLAND MORTGAGE EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4162

Amount of Each Receipt this Period
250.00

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: PAGE 14 OF 126
(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. JOSEPH LEE BROWN

Mailing Address 2300 NORTH PALM STREET

City State Zip Code
LITTLE ROCK AR 72207-2052

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.4149

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAM BUCHANAN

Mailing Address 4920 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-3708

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3969

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 19 HICKORY CREEK DRIVE

City State Zip Code
LITTLE ROCK AR 72212-2509

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

Name of Employer Occupation
STEPHENS INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.4142

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 15 OF 126
	<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. DANIELS BYNUM

Mailing Address 5024 CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5442

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

Name of Employer Occupation
ONE BANK AND TRUST BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 31 / 2015

Transaction ID : SA11.4194

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MICHAEL CALHOUN

Mailing Address 4020 RICHARDS ROAD

City State Zip Code
NORTH LITTLE ROCK AR 72117-2650

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 12 / 2015

Transaction ID : SA11.3976

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD M. CAMERON

Mailing Address P.O. BOX 21440

City State Zip Code
LITTLE ROCK AR 72221-1440

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

Name of Employer Occupation
MOUNTAINEER CORP. CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 01 / 2015

Transaction ID : SA11.3815

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3450.00

**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 126
	<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. CHRIS CARNAHAN

Mailing Address 1640 CHICO DRIVE

City CONWAY State AR Zip Code 72034-7369

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

Name of Employer STATE OF ARKANSAS Occupation DEPUTY PROSECUTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2015

Transaction ID : SA11.4182

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LOUIS A. CELLA

Mailing Address 705 OLIVE STREET SUITE 804

City ST. LOUIS State MO Zip Code 63101-2210

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

Name of Employer OAKLAWN Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4020

Amount of Each Receipt this Period
 1000.00
 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11.4112

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 17 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. ED 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.3973

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

Mailing Address **24 CAMERONWOOD ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72223-9784**

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

Name of Employer **CLARK CONTRACTORS** Occupation **C.E.O.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.4129

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. HOWARD COCKRILL JR.

Mailing Address **50 RIVER RIDGE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72227-1518**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3941

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 18 OF 126
(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. BEN COMBS
 Mailing Address 10 RIVER VIEW POINT
 City State Zip Code
 LITTLE ROCK AR 72227-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COMBS AND COMPANY ADVERTISING
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 15 2015
Transaction ID : SA11.3898
 Amount of Each Receipt this Period
 250.00
 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: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 13 2015
Transaction ID : SA11.4156
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL G. CRONKHITE
 Mailing Address 215 BUCKLAND DRIVE
 City State Zip Code
 LITTLE ROCK AR 72223-4535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STEPHENS INC. WEALTH MANAGEMENT PLANNER
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 15 2015
Transaction ID : SA11.3925
 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 19 OF 126
	<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)
STEVE DAUGHERTY

Mailing Address 7107 FERNDALE CUTOFF

City State Zip Code
LITTLE ROCK AR 72223-9430

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3942

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LILLIAN D. DAVENPORT

Mailing Address 4612 CLUB ROAD

City State Zip Code
LITTLE ROCK AR 72207-2012

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : SA11.4006

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAN DAVIDSON

Mailing Address 7 EDGEHILL ROAD

City State Zip Code
SEARCY AR 72143-9488

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.4177

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: PAGE 20 OF 126
(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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11.4173

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **5008 HAWTHORNE ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-3710**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.4189

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HASKELL 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 **MCGEORGE CONTRACTING COMPANY** Occupation **C.E.O.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3917

Amount of Each Receipt this Period
2000.00
 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 21 OF 126
	<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 DILL

Mailing Address **8 WATERVIEW COURT**

City **LITTLE ROCK** State **AR** Zip Code **72223-4488**

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

Name of Employer **CEP** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3915

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MANDY DILLARD

Mailing Address **6 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11.3885

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MANDY DILLARD

Mailing Address **6 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5444**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : SA11.3886

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

5650.00

**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 126
	<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. WILLIAM DILLARD II

Mailing Address P.O. BOX 486

City: LITTLE ROCK State: AR Zip Code: 72203-0486

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

Name of Employer: DILLARD'S Occupation: CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 10 / 16 / 2015

Transaction ID : SA11.3951

Amount of Each Receipt this Period: 2700.00

CONTRIBUTION

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

Mailing Address P.O. BOX 486

City: LITTLE ROCK State: AR Zip Code: 72203-0486

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

Name of Employer: DILLARD'S Occupation: CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 10 / 16 / 2015

Transaction ID : SA11.3952

Amount of Each Receipt this Period: 2700.00

CONTRIBUTION

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 10 / 2015

Transaction ID : SA11.3968

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 126
	<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. MAC DODSON

Mailing Address 10 LONGFELLOW LANE

City State Zip Code
LITTLE ROCK AR 72207-3750

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3985

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LAURA DORAMUS

Mailing Address 9 WEST PALISADES

City State Zip Code
LITTLE ROCK AR 72207-1855

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.4150

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 9 WEST PALISADES

City State Zip Code
LITTLE ROCK AR 72207-1855

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

Name of Employer Occupation
STEPHENS, INC. C.F.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.4151

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 24 OF 126

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. EDDIE DRILLING

Mailing Address 1 GREENBRIER ROAD

City State Zip Code
LITTLE ROCK AR 72202-1903

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

Name of Employer Occupation
AT&T INC. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3892

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 State Zip Code
CONWAY AR 72034-9670

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11.4078

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 25 ST. ANDREW DRIVE

City State Zip Code
LITTLE ROCK AR 72212-2908

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11.4002

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: PAGE 25 OF 126
(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. CLARENCE J. DUVALL JR.

Mailing Address 2409 NORTH UNIVERSITY AVE

City State Zip Code
LITTLE ROCK AR 72207-3607

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.4169

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SKIP EBEL

Mailing Address 6212 KAVANAUGH BLVD

City State Zip Code
LITTLE ROCK AR 72207-4253

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

Name of Employer Occupation
FRIDAY ELDREDGE AND CLARK ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3980

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. KELLY EICHLER

Mailing Address 4901 EAST CRESTWOOD

City State Zip Code
LITTLE ROCK AR 72207-5407

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

Name of Employer Occupation
STATE OF ARKANSAS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.3964

Amount of Each Receipt this Period
200.00
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)
 11a 12 11b 13a 11c 13b 11d 14 11e 15
 PAGE 26 OF 126

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. KELLY EICHLER

Mailing Address 4901 EAST CRESTWOOD

City State Zip Code
 LITTLE ROCK AR 72207-5407

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

Name of Employer Occupation
 STATE OF ARKANSAS ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4191

Amount of Each Receipt this Period
 800.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. PETER EMANUEL

Mailing Address 22 CANYON RIDGE COURT

City State Zip Code
 LITTLE ROCK AR 72223-5982

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.4165

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DON ERBACH JR.

Mailing Address 8 REDCOAT LANE

City State Zip Code
 LITTLE ROCK AR 72227-2311

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

Name of Employer Occupation
 PASCHALL STRATEGIC COMMUNICATIONS PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11.4186

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1550.00

**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 126
	<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. JACKSON FARROW JR.

Mailing Address **20 RIVER RIDGE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72227-1503**

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

Name of Employer **STEPHENS CAPITAL PARTNERS** Occupation **GENERAL COUNSEL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3921

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address **17 ST. JOHN'S PLACE**

City **LITTLE ROCK** State **AR** Zip Code **72207-3700**

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

Name of Employer **COLLIERS INTERNATIONAL AR** Occupation **REAL ESTATE BROKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3893

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN P. FLETCHER

Mailing Address **2600 N. PIERCE ST.**

City **LITTLE ROCK** State **AR** Zip Code **72207-3623**

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

Name of Employer **WINDSTREAM** Occupation **ATTORNEY AT LAW**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.4152

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 28 OF 126
	<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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11.3944

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address 900 S SHACKLEFORD ROAD SUITE 200

City LITTLE ROCK State AR Zip Code 72211-3847

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

Name of Employer WESTROCK CAPITAL PARTNERS, L.L.C. Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.3999

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address 900 S SHACKLEFORD ROAD SUITE 200

City LITTLE ROCK State AR Zip Code 72211-3847

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

Name of Employer WESTROCK CAPITAL PARTNERS, L.L.C. Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11.4070

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: PAGE 29 OF 126
(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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4155

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 6001 GREENWOOD

City State Zip Code
LITTLE ROCK AR 72207-1840

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

Name of Employer Occupation
MITCHELL, WILLIAMS, SELIG, GATES, & WO ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.3896

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. BRENDA FULKERSON

Mailing Address 124 WEST CAPITOL AVENUE
SUITE 1620

City State Zip Code
LITTLE ROCK AR 72201-3744

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

Name of Employer Occupation
FULKERSON & COMPANY REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3929

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 30 OF 126
	<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. GASTON P. GIBSON

Mailing Address 2300 BEECHWOOD STREET

City State Zip Code
LITTLE ROCK AR 72207-2026

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

Name of Employer Occupation
GPG INC OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3912

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 5 LATOUR LN

City State Zip Code
LITTLE ROCK AR 72223-8905

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

Name of Employer Occupation
STEPHENS, INC. SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.4154

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KENNETH ALLEN GUNDERMAN

Mailing Address 2000 COUNTRY CLUB LANE

City State Zip Code
LITTLE ROCK AR 72207-

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

Name of Employer Occupation
COMMUNICATION SALES & LEASING, INC. CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : SA11.4021

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 31 OF 126
	<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. PETER G. HALLER

Mailing Address 2360 S. ARLINGTON RIDGE ROAD

City ARLINGTON State VA Zip Code 22202-2255

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

Name of Employer HILL STRATEGY, LLC Occupation MANAGING MEMBER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11.4184

Amount of Each Receipt this Period
 1000.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3894

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 2201 NORTH SPRUCE

City LITTLE ROCK State AR Zip Code 72207-4731

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

Name of Employer ENTERPRISE FINANCIAL SOLUTIONS Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.3984

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 32 OF 126
	<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) JASON HARVISON		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2015
Mailing Address 8456 DROP TINE DR		Transaction ID : SA11.4130
City BENBROOK	State TX	Zip Code 76126-5189
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer ELEVATE	Occupation FINANCE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. LEONARD HASSON		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2015
Mailing Address 75 PINEHURST CIRCLE		Transaction ID : SA11.3933
City LITTLE ROCK	State AR	Zip Code 72212-3432
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer MANN, HASSON, AND COMPANY	Occupation ACCOUNTANT/C.P.A.	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MR. HARRY HASTINGS III		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2015
Mailing Address 29 SHERRILL ROAD		Transaction ID : SA11.3924
City LITTLE ROCK	State AR	Zip Code 72202-1516
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00	

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 33 OF 126
	<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. JEFFREY R. HATHAWAY

Mailing Address 1901 NORTH SPRUCE

City State Zip Code
LITTLE ROCK AR 72207-4717

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

Name of Employer Occupation
COLDWELL BANKER COMMERCIAL HATHAW REAL ESTATE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4159

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. 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. MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : SA11.4054

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA 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
ARKANSAS SPECIAL EDUCATION LAW FIRM ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : SA11.4055

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

5650.00

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

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

FOR LINE NUMBER: PAGE 34 OF 126
(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. ERIC HERGET

Mailing Address 425 WEST CAPITOL AVE
SUITE 3550

City Little Rock State AR Zip Code 72201-3558

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

Name of Employer THE HOLMES ORGANIZATION OF ARKANSAS; Occupation INSURANCE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3909

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 2120 CANAL POINTE

City Little Rock State AR Zip Code 72202-1428

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

Name of Employer RETIRED; Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2015

Transaction ID : SA11.3974

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 31

City Little Rock State AR Zip Code 72203-0031

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

Name of Employer ARKANSAS FARM BUREAU FEDERATION; Occupation VICE PRESIDENT OF PUBLIC POLICY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2015

Transaction ID : SA11.4175

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 126
	<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 HOLLANSWORTH

Mailing Address **9 UTRERA LANE**

City **HOT SPRINGS VILLAG** State **AR** Zip Code **71909-7895**

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

Name of Employer **HOLLY CLASSICS** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 30 / 2015

Transaction ID : SA11.4073

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DENNIS R. HUNT

Mailing Address **1544 W ARTHURS COURT**

City **FAYETTEVILLE** State **AR** Zip Code **72701-2789**

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

Name of Employer **STEPHENS, INC.** Occupation **PUBLIC FINANCE OFFICER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.3920

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HOWARD C. HURST

Mailing Address **2422 COUNTRY CLUB LANE**

City **LITTLE ROCK** State **AR** Zip Code **72207-2046**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.4174

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 36 OF 126
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MR. JIM IRWIN

Mailing Address **7 RAQUET COURT**

City **LITTLE ROCK** State **AR** Zip Code **72227-2308**

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

Name of Employer **IRWIN PARTNERS** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4166

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : SA11.4128

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **8 NOYANT CT**

City **LITTLE ROCK** State **AR** Zip Code **72223-5081**

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

Name of Employer **STEPHENS INC.** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.4145

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 37 OF 126
	<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 M. JARCHO

Mailing Address 109 VERTICAL LOFT DRIVE

City State Zip Code
LITTLE ROCK AR 72201-1150

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

Name of Employer Occupation
STEPHENS INC. MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.4143

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. THOMAS ROBERT JOHNSON

Mailing Address 606 NORTH BRYAN STREET

City State Zip Code
LITTLE ROCK AR 72205-2706

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.3937

Amount of Each Receipt this Period
400.00

CONTRIBUTION

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

Mailing Address 17 RIDGEVIEW DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2339

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

Name of Employer Occupation
CREWS AND ASSOCIATES INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3916

Amount of Each Receipt this Period
200.00

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 38 OF 126
	<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. JIM JONES

Mailing Address 17 RIDGEVIEW DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2339

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

Name of Employer Occupation
CREWS AND ASSOCIATES INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.4192

Amount of Each Receipt this Period
800.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3998

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 1314 LOYOLA DRIVE

City State Zip Code
LITTLE ROCK AR 72211-6110

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4167

Amount of Each Receipt this Period
250.00

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 39 OF 126
	<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. ASHLEY KNICKREHM

Mailing Address **17 VANTAGE POINT**

City **LITTLE ROCK** State **AR** Zip Code **72207-1617**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3900

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. 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 **EVP GENERAL COUNSEL**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3907

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **4822 COUNTRY CLUB BOULEVARD**

City **LITTLE ROCK** State **AR** Zip Code **72207-4720**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3966

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 40 OF 126
	<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. DIANNE LAW

Mailing Address **9 TOULOUSE COURT**

City **LITTLE ROCK** State **AR** Zip Code **72211-5536**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.3908

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **51 ROBINWOOD DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72227-2225**

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

Name of Employer **LITTLE ROCK ATHLETIC CLUB** Occupation **HEALTH CLUB C.E.O.**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3903

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **2303 BEECHWOOD STREET**

City **LITTLE ROCK** State **AR** Zip Code **72207-2025**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3935

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 41 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

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

Mailing Address 2303 BEECHWOOD ROAD

City State Zip Code
LITTLE ROCK AR 72207-2025

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

Name of Employer Occupation
FOREST HILL CAPITAL, L.L.C. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3934

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. PHAM H. LIEM

Mailing Address 343 VALLEY CLUB CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2900

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3922

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. PHAM H. LIEM

Mailing Address 343 VALLEY CLUB CIRCLE

City State Zip Code
LITTLE ROCK AR 72212-2900

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11.4107

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

3050.00

**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 42 OF 126

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 16 2015

Transaction ID : SA11.3932

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 1708 NORTH PALM STREET

City State Zip Code
 LITTLE ROCK AR 72207-5456

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

Name of Employer Occupation
 MAGIE MABREY EYE CLINIC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 11 2015

Transaction ID : SA11.3972

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 6 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. SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 05 2015

Transaction ID : SA11.3811

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 43 OF 126
(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. DAVID MARTIN
 Mailing Address 446 VALLEY CLUB CIRCLE
 City State Zip Code
 LITTLE ROCK AR 72212-3439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MARTIN-WILBOURN PARTNERS, L.L.C. MARKETING CONSULTANT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 15 2015
Transaction ID : SA11.3930
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EVERETTE MARTIN
 Mailing Address 1 RIVER VALLEY
 City State Zip Code
 LITTLE ROCK AR 72227-1504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COULSON OIL COMPANY GENERAL COUNSEL
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 12 2015
Transaction ID : SA11.4140
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. 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: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2015
Transaction ID : SA11.3943
 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: PAGE 44 OF 126
(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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2015

Transaction ID : SA11.3977

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3901

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 1911 COUNTRY CLUB LANE

City State Zip Code
LITTLE ROCK AR 72207-2035

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

Name of Employer Occupation
MAYTON, NEWKIRK, & JONES ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4134

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

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

5650.00

**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 126
	<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	

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. MARK MCBRYDE

Mailing Address 30 RIDGEVIEW DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2361

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.4146

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANDREW MCNEILL

Mailing Address 15 RIM ROCK ROAD

City State Zip Code
RUSSELLVILLE AR 72802-8829

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

Name of Employer Occupation
DENALI WATER SOLUTIONS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3926

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ALLAN E. MEADORS

Mailing Address 1812 BEECHWOOD

City State Zip Code
LITTLE ROCK AR 72207-2002

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11.3993

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: PAGE 46 OF 126
(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. ALLAN MENDEL

Mailing Address **18 RIVER RIDGE CIRCLE**

City **LITTLE ROCK** State **AR** Zip Code **72227-1503**

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

Name of Employer **MENDEL CAPITAL MANAGEMENT** Occupation **INVESTMENT MANAGER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 07 / 2015

Transaction ID : SA11.4000

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **42 CHENAL DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-9026**

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

Name of Employer **STEPHENS, INC.** Occupation **INVESTMENT ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
10 / 15 / 2015

Transaction ID : SA11.3902

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **PO BOX 1720**

City **LITTLE ROCK** State **AR** Zip Code **72203-1720**

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

Name of Employer **R & E SUPPLY** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
10 / 06 / 2015

Transaction ID : SA11.3995

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

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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)
DR. GEORGE MITCHELL

Mailing Address 1511 NORTH FILLMORE

City State Zip Code
LITTLE ROCK AR 72207-5371

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.3982

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4157

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 53 TALLYHO LANE

City State Zip Code
LITTLE ROCK AR 72227-2441

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

Name of Employer Occupation
SIMMONS FIRST NATIONAL BANK BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.3919

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: PAGE 48 OF 126
(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. RANDALL G. MOUROT

Mailing Address 2212 BEECHWOOD

City State Zip Code
LITTLE ROCK AR 72207-2024

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

Name of Employer Occupation
CLEAR MTN REFRESHMENTS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.4032

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3814

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ERIC P. 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
AR DEVELOPMENTAL DISABILITIES COUNCIL EXECUTIVE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3927

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 49 OF 126
	<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 DAN NABHOLZ

Mailing Address 2500 BROOKFIELD DRIVE

City State Zip Code
CONWAY AR 72032-4495

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 24 / 2015

Transaction ID : SA11.4200

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 15 / 2015

Transaction ID : SA11.3897

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFERY W. NOLAN

Mailing Address 202 W 19TH ST

City State Zip Code
EL DORADO AR 71730-3115

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 17 / 2015

Transaction ID : SA11.4048

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3950.00

**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 126
	<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. JEFFERY W. NOLAN

Mailing Address 202 W 19TH ST

City State Zip Code
EL DORADO AR 71730-3115

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : SA11.4049

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN T. O'ROURKE

Mailing Address 11028 STANMORE DRIVE

City State Zip Code
POTOMAC MD 20854-1525

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SA11.4066

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

IN-KIND FOOD & BEVERAGE FOR FUNDRAISING EVENT

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 01 / 2015

Transaction ID : SA11.4001

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 51 OF 126
(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. GARY PALMER

Mailing Address 1919 OXMOOR RD. 235

City State Zip Code
HOMEWOOD AL 35209-3502

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

Name of Employer Occupation
STATE OF ALABAMA CONGRESSMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2015

Transaction ID : SA11.4121

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. CHERYL PAYNE-NESUDA

Mailing Address 17 ALTON LANE

City State Zip Code
LITTLE ROCK AR 72211-2191

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.4131

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 415 NORTH MCKINLEY STREET
SUITE 1200

City State Zip Code
LITTLE ROCK AR 72205-3279

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.4172

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 52 OF 126
	<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. EUGENE PFEIFER

Mailing Address 16300 CANTRELL ROAD

City State Zip Code
LITTLE ROCK AR 72223-4232

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE OWNER/MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3939

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM PLUNKETT II

Mailing Address 2 VALLEY CREEK VIEW

City State Zip Code
LITTLE ROCK AR 72223-4639

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

Name of Employer Occupation
HABITAT FOR HUMANITY OF CENTRAL ARK. CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4163

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.4147

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: PAGE 53 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
MRS. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.3986

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. ROBERT A. PORTER JR.

Mailing Address 1900 SHADOW LANE

City State Zip Code
LITTLE ROCK AR 72207-2018

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3910

Amount of Each Receipt this Period
 500.00
 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. **C**

Name of Employer Occupation
SOUTHERN REGIONAL ANESTHESIOLOGY C PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.4164

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 54 OF 126
	<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. JOEL PRITCHETT

Mailing Address 918 SKYLINE DRIVE

City State Zip Code
SEARCY AR 72143-6510

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SA11.3946

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 12 MARBLE COURT

City State Zip Code
LITTLE ROCK AR 72212-2117

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

Name of Employer Occupation
JH TITLE GROUP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3997

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. CINDY THOMAS PUGH

Mailing Address 48 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5462

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3967

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 55 OF 126
(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. TOMMY RAYBURN III

Mailing Address 5001 HAWTHORNE RD

City State Zip Code
LITTLE ROCK AR 72207-3709

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

Name of Employer Occupation
RAYBURN M.D. P.A. PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4190

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 5 LONGFELLOW PLACE

City State Zip Code
LITTLE ROCK AR 72207-3723

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

Name of Employer Occupation
STEPHENS, INC. CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11.3887

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. 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 COMPANY CHIEF EXECUTIVE OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.3940

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

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

3450.00

**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 126
(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. SCOTT RITTELMAYER

Mailing Address 1621 NORTH JACKSON STREET

City State Zip Code
LITTLE ROCK AR 72207-5445

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

Name of Employer Occupation
RAYMOND JAMES MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3890

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES W. ROGERS

Mailing Address 5409 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-3751

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

Name of Employer Occupation
SPORTSTOP, INC OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3891

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CARL ROSENBAUM

Mailing Address 84 ROBINWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72227-2218

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

Name of Employer Occupation
SAFEFOODS, INC. CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11.4047

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: PAGE 57 OF 126
(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. ROSS RUCKER

Mailing Address 100 GERMA Y

City State Zip Code
LITTLE ROCK AR 72223-5522

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

Name of Employer Occupation
STEPHENS INC. INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11.3945

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LESLIE C. RUTLEDGE

Mailing Address 12002 SHAWNEE FOREST DRIVE

City State Zip Code
LITTLE ROCK AR 72212-2326

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

Name of Employer Occupation
STATE OF AR ATTORNEY GENERAL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3904

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LOUIS E. SCHICKEL

Mailing Address 11601 PLEASANT RIDGE ROAD
SUITE 300

City State Zip Code
LITTLE ROCK AR 72212-2241

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE DEVELOPER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11.3963

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: PAGE 58 OF 126
(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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.3981

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TOM SCHUECK

Mailing Address P.O. BOX 16390

City State Zip Code
LITTLE ROCK AR 72231-6390

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

Name of Employer Occupation
LEXICON, INC. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11.3938

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH SCOTT

Mailing Address 2206 NORTH PALM STREET

City State Zip Code
LITTLE ROCK AR 72207-2050

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11.4029

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

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

4200.00

**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 126
	<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. MORIN M. SCOTT JR.

Mailing Address 2206 N PALM ST

City State Zip Code
LITTLE ROCK AR 72207-2050

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

Name of Employer Occupation
SOUTHWEST HOTELS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.4028

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

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

Mailing Address 4815 HAWTHORNE ROAD

City State Zip Code
LITTLE ROCK AR 72207-3705

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

Name of Employer Occupation
LITTLE ROCK REALTORS ASSN. EX. DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : SA11.4033

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 12 CHAPARRAL LANE

City State Zip Code
LITTLE ROCK AR 72212-3620

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

Name of Employer Occupation
SIMMONS FIRST TRUST CO. BANKING EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.3983

Amount of Each Receipt this Period
125.00

CONTRIBUTION

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

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

3075.00

**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 126
	<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 SHEWMAKER

Mailing Address P.O. BOX 1815

City State Zip Code
BENTONVILLE AR 72712-1815

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

Name of Employer Occupation
JAC'S RANCH MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : SA11.4127

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 11823 FAIRWAY DRIVE

City State Zip Code
LITTLE ROCK AR 72212-3422

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

Name of Employer Occupation
DATAMAX, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3959

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.3987

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 61 OF 126
(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. ROBERT D. SMITH

Mailing Address 4805 CRESTWOOD DRIVE

City State Zip Code
LITTLE ROCK AR 72207-5437

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

Name of Employer Occupation
ROBERT D. SMITH, III ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : SA11.4148

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. RICARDO SOTOMORA

Mailing Address 3 RIVER RIDGE COURT

City State Zip Code
LITTLE ROCK AR 72227-1513

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

Name of Employer Occupation
PEDIATRIX MEDICAL GROUP OF ARKANSAS PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3988

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARTHA N. SOWELL

Mailing Address 12400 HUNTERS GLEN BOULEVARD #2

City State Zip Code
LITTLE ROCK AR 72211-2235

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11.4004

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 62 OF 126
	<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. DAVID STAGGS

Mailing Address 412 HONEY HILL ROAD

City State Zip Code
SEARCY AR 72143-9383

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

Name of Employer Occupation
WHITE RIVER MEDICAL CENTER PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : SA11.4034

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address 12 CHIMNEY SWEEP LANE

City State Zip Code
LITTLE ROCK AR 72212-2083

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

Name of Employer Occupation
STEPHENS, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3928

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WARREN STEPHENSON

Mailing Address 2024 ARKANSAS VALLEY DRIVE
807

City State Zip Code
LITTLE ROCK AR 72212-4166

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

Name of Employer Occupation
PARTY CITY OF ARKANSAS, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3978

Amount of Each Receipt this Period
2000.00
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 63 OF 126
	<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. WARREN A. STEPHENS

Mailing Address 111 CENTER STREET

City: LITTLE ROCK State: AR Zip Code: 72201-4402

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

Name of Employer: STEPHENS, INC. Occupation: INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 10 / 20 / 2015

Transaction ID : SA11.3883

Amount of Each Receipt this Period: 2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARREN A. STEPHENS

Mailing Address 111 CENTER STREET

City: LITTLE ROCK State: AR Zip Code: 72201-4402

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

Name of Employer: STEPHENS, INC. Occupation: INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 10 / 20 / 2015

Transaction ID : SA11.3884

Amount of Each Receipt this Period: 2700.00

CONTRIBUTION

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 29 / 2015

Transaction ID : SA11.4181

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

5650.00

**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 126
	<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. NOEL STRAUSS

Mailing Address **37 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207-5461**

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

Name of Employer **STEPHENS INC.** Occupation **BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : SA11.4153

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP TAPPAN

Mailing Address **8 E PALISADES DR**

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

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

Name of Employer **SIMMONS BANK** Occupation **EVP**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : SA11.4057

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **4801 NORTH HILLS BOULEVARD
702**

City **NORTH LITTLE ROCK** State **AR** Zip Code **72116-7566**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3947

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 65 OF 126
	<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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.3970

Amount of Each Receipt this Period
250.00
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.4026

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SIDNEY THOM

Mailing Address 33 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
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2015

Transaction ID : SA11.4178

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: PAGE 66 OF 126
(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. FRANK THOMAS

Mailing Address **14601 BLACK BEAR DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72223-1993**

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

Name of Employer **STEPHENS INVESTMENTS HOLDINGS, L.L.C** Occupation **ASSISTANT TO THE CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3906

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address **228 TAYLOR PARK DRIVE**

City **LITTLE ROCK** State **AR** Zip Code **72211-4077**

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

Name of Employer **ELECTRIC COOPERATIVES OF ARKANSAS** Occupation **VICE PRESIDENT OF GOVERNMENT AFFAIR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4168

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS IRENE CHRISTINE VRATSIAS

Mailing Address **69 PINEHURST CR**

City **LITTLE ROCK** State **AR** Zip Code **72212-3432**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11.3971

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 67 OF 126
(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. 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
HAUGHT, WADE, L.L.P. ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2015

Transaction ID : SA11.4180

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LARRY W. WALTHER

Mailing Address 6 CASCADES DRIVE

City State Zip Code
LITTLE ROCK AR 72212-3306

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

Name of Employer Occupation
STATE OF ARKANSAS DFA DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2015

Transaction ID : SA11.4136

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MILLIE WARD

Mailing Address 16 GLENRIDGE ROAD

City State Zip Code
LITTLE ROCK AR 72227-2230

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

Name of Employer Occupation
STONE WARD ADVERTISING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3914

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 68 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

A. Full Name (Last, First, Middle Initial)
DR. CHARLES WATKINS

Mailing Address 44 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5462

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

Name of Employer Occupation
CARDIOVASCULAR SURGEONS, PA PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2015

Transaction ID : SA11.3911

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. TERRI BUTLER WATKINS

Mailing Address 44 EDGEHILL ROAD

City State Zip Code
LITTLE ROCK AR 72207-5462

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

Name of Employer Occupation
WELLS FARGO STOCKBROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.3913

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JANE P. WAYLAND

Mailing Address 300 EAST THIRD STREET #801

City State Zip Code
LITTLE ROCK AR 72201-1648

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

Name of Employer Occupation
UALR DEAN AND PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11.3816

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 69 OF 126
	<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. 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 UALR Occupation DEAN AND PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11.4133

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 4 SPRING VALLEY LANE

City Little Rock State AR Zip Code 72223-4494

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

Name of Employer IDATAFY Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4158

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES B. WHITESIDE III

Mailing Address 2905 NORTH FILLMORE

City Little Rock State AR Zip Code 72207-2812

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

Name of Employer MERRILL LYNCH Occupation FINANCIAL CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2015

Transaction ID : SA11.3936

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

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

950.00

**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 126
	<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. GORDON M. WILBOURN

Mailing Address 12 RIDGEVIEW CT

City State Zip Code
LITTLE ROCK AR 72227-2360

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

Name of Employer Occupation
KUTAK ROCK L.L.P. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SA11.4160

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 100 MORGAN KEEGAN DRIVE, SUITE 305

City State Zip Code
LITTLE ROCK AR 72202-2217

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

Name of Employer Occupation
MARTIN-WILBOURN PARTNERS CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.3899

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK V. WILLIAMSON

Mailing Address P.O. BOX 7503

City State Zip Code
LITTLE ROCK AR 72217-7503

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

Name of Employer Occupation
MARK V. WILLIAMSON CO., INC. INSURANCE AGENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : SA11.4003

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: PAGE 71 OF 126
(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. MARK V. WILLIAMSON
 Mailing Address P.O. BOX 7503
 City State Zip Code
 LITTLE ROCK AR 72217-7503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MARK V. WILLIAMSON CO., INC. INSURANCE AGENT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 01 2015
Transaction ID : SA11.4068
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL WILSON
 Mailing Address 120 VILLAGE CREEK CT
 City State Zip Code
 NORTH LITTLE ROCK AR 72116-7660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STEPHENS INSURANCE LLC SR. VICE PRESIDENT
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 09 2015
Transaction ID : SA11.4138
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN WOMACK
 Mailing Address 49 WELLINGTON COLONY DRIVE
 City State Zip Code
 LITTLE ROCK AR 72211-2089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ARVEST BANK BANKER
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 12 2015
Transaction ID : SA11.4025
 Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 126
	<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. DAN C. YOUNG

Mailing Address 1824 NORTH JACKSON STREET

City State Zip Code
LITTLE ROCK AR 72207-4708

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

Name of Employer Occupation
ROSE LAW FIRM ATTORNEY AT LAW

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11.4170

Amount of Each Receipt this Period
250.00
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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

153425.00

**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 126
	<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) BYRNE VICTORY FUND		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015
Mailing Address PO BOX 3723		Transaction ID : SA11.4059
City MONTGOMERY	State AL	Zip Code 36109-0723
FEC ID number of contributing federal political committee. C C00567511	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRIS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2015
Mailing Address PO BOX 30844		Transaction ID : SA11.4043
City BETHESDA	State MD	Zip Code 20824-0844
FEC ID number of contributing federal political committee. C C00580696	Amount of Each Receipt this Period 65.34 CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 39900.58	ATTRIBUTIONS BELOW ITEMIZED THRESHOLD

Full Name (Last, First, Middle Initial) COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRIS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2015
Mailing Address PO BOX 30844		Transaction ID : SA11.4044
City BETHESDA	State MD	Zip Code 20824-0844
FEC ID number of contributing federal political committee. C C00580696	Amount of Each Receipt this Period 14.49 CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 39900.58	ATTRIBUTIONS BELOW ITEMIZED THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	1079.83
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: PAGE 74 OF 126
(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)
AKSM UROLOGY PAC

Mailing Address 100 W 3RD AVENUE
SUITE 350

City Columbus State OH Zip Code 43201-7205

FEC ID number of contributing federal political committee. **C C00489419**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2015

Transaction ID : SA11.4036

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION

Mailing Address 101 CONSTITUTION AVE NW
SUITE 700

City D.C. State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.4010

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

Mailing Address 919 EIGHTEENTH STREET, N.W.
SUITE 300

City WASHINGTON State DC Zip Code 20006-5526

FEC ID number of contributing federal political committee. **C C00038604**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.3956

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 75 OF 126
(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)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

Mailing Address **PALLADIAN 1**
220 LEIGH FARM RD

City **DURHAM** State **NC** Zip Code **27707-8110**

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.4009

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC

Mailing Address **1800 M ST NW**
SUITE 300S

City **WASHINGTON** State **DC** Zip Code **20036-5830**

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.3992

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC

Mailing Address **1800 M ST NW**
SUITE 300S

City **WASHINGTON** State **DC** Zip Code **20036-5830**

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4095

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 76 OF 126
(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)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 1061 AMERICAN LANE

City State Zip Code
SCHAUMBURG IL 60173-4973

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.4019

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AT&T, INC. FEDERAL PAC

Mailing Address 208 SOUTH AKARD STREET
SUITE 2701

City State Zip Code
DALLAS TX 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.4013

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AT&T, INC. FEDERAL PAC

Mailing Address 208 SOUTH AKARD STREET
SUITE 2701

City State Zip Code
DALLAS TX 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4102

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 77 OF 126
	<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)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003-3030

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2015

Transaction ID : SA11.4117

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK PO

Mailing Address 410 17TH ST

City DENVER State CO Zip Code 80202-4402

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.4195

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRYAN CAVE LLP POLITICAL ACTION COMMITTEE

Mailing Address 1155 F ST NW

City WASHINGTON State DC Zip Code 20004-1312

FEC ID number of contributing federal political committee. **C C00332643**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4096

Amount of Each Receipt this Period
250.00

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: PAGE 78 OF 126
(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)
CIT GROUP INC PAC (CIT PAC)

Mailing Address 1 CIT DR

City State Zip Code
LIVINGSTON NJ 07039-5703

FEC ID number of contributing federal political committee. **C C00379420**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11.4039

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CME GROUP INC. PAC

Mailing Address 20 S WACKER DR

City State Zip Code
CHGO IL 60606-7431

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11.3957

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COMMERCIAL REAL ESTATE FINANCE COUNCIL PAC

Mailing Address 20 BROAD STREET
7TH FLOOR

City State Zip Code
NEW YORK NY 10005-2601

FEC ID number of contributing federal political committee. **C C00411173**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4011

Amount of Each Receipt this Period
 3000.00

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: PAGE 79 OF 126
(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)
COMMITTEE FOR ADVANCEMENT OF COTTON

Mailing Address **P.O. BOX 2995**

City **CORDOVA** State **TN** Zip Code **38088-2995**

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3958

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTIO

Mailing Address **1201 F ST NW**

City **WASHINGTON** State **DC** Zip Code **20004-1217**

FEC ID number of contributing federal political committee. **C C00111559**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11.4206

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTIO

Mailing Address **1201 F ST NW**

City **WASHINGTON** State **DC** Zip Code **20004-1217**

FEC ID number of contributing federal political committee. **C C00111559**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11.4207

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: PAGE 80 OF 126
(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)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVE NW

City D.C. State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4051

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVE NW

City D.C. State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11.4052

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVE NW

City D.C. State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11.4204

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 81 OF 126
	<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)
DAIRY FARMERS OF AMERICA, INC. - DEPAC (DAIRY EDUC

Mailing Address 10220 N. AMBASSADOR DR.

City KANSAS CITY State MO Zip Code 64153-1367

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11.4115

Amount of Each Receipt this Period
 1000.00

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11.4050

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220-0503

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : SA11.4023

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 82 OF 126
	<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 Springfield State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11.4060

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICES INSTITUTE PAC

Mailing Address 607 14TH ST NW STE. 750

City Washington State DC Zip Code 20005-2085

FEC ID number of contributing federal political committee. **C** C00409714

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4012

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION PAC

Mailing Address 2941 FAIRVIEW PARK DRIVE #100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2015

Transaction ID : SA11.4041

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 83 OF 126
	<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. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address **25 MASSACHUSETTS AVE NW**
SUITE 400

City **WASHINGTON** State **DC** Zip Code **20001-1427**

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2015

Transaction ID : SA11.4046

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. GRANT THORNTON POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
GRANT THORNTON POLITICAL ACTION COMMITTEE

Mailing Address **175 W JACKSON BLVD**
SUITE 2000

City **CHGO** State **IL** Zip Code **60606-**

FEC ID number of contributing federal political committee. **C C00408260**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 19 / 2015

Transaction ID : SA11.4040

Amount of Each Receipt this Period
3000.00
 CONTRIBUTION

C. INTERCONTINENTAL EXCHANGE INC PAC

Full Name (Last, First, Middle Initial)
INTERCONTINENTAL EXCHANGE INC PAC

Mailing Address **2100 RIVEREDGE PKWY STE 500**

City **ATLANTA** State **GA** Zip Code **30328-4676**

FEC ID number of contributing federal political committee. **C C00443168**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : SA11.4118

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 126
	<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 PAPER POLITICAL ACTION COMMITTEE (IP

Mailing Address 1101 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2504

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : SA11.4035

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC

Mailing Address P.O. BOX 18254

City WASHINGTON State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11.4037

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LOEWS CORPORATION PUBLIC AFFAIRS COMMITTEE

Mailing Address 667 MADISON AVE

City NY State NY Zip Code 10065-8029

FEC ID number of contributing federal political committee. **C C00416495**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2015

Transaction ID : SA11.4119

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 85 OF 126
	<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. MARKETAXESS HOLDINGS INC PAC MARKETAXESS PAC

Full Name (Last, First, Middle Initial)
MARKETAXESS HOLDINGS INC PAC MARKETAXESS PAC

Mailing Address 299 PARK AVE
10TH FLOOR

City NY State NY Zip Code 10171-3804

FEC ID number of contributing federal political committee. **C** C00475061

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11.4018

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. MARTHA PAC

Full Name (Last, First, Middle Initial)
MARTHA PAC

Mailing Address 1006 PENDLETON ST

City ALEXANDRIA State VA Zip Code 22314-1837

FEC ID number of contributing federal political committee. **C** C00527309

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4014

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FU

Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FU

Mailing Address 1095 6TH AVE

City NEW YORK State NY Zip Code 10036-6797

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11.4097

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 86 OF 126
	<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)
MURPHY OIL CORPORATION PAC

Mailing Address P.O. BOX 602

City State Zip Code
EL DORADO AR 71731-0602

FEC ID number of contributing federal political committee. **C C00145722**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.4199

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION CO

Mailing Address 4300 WILSON BLVD
SUITE 400

City State Zip Code
ARLINGTON VA 22203-4168

FEC ID number of contributing federal political committee. **C C00113241**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 11 2015

Transaction ID : SA11.4101

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS PAC

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11.4196

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 87 OF 126
	<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 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11.4205

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1015 15TH ST NW #930

City WASHINGTON State DC Zip Code 20005-2622

FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11.3953

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION PAC

Mailing Address 1301 PENNSYLVANIA AVENUE, N.W. SUITE 300

City WASHINGTON State DC Zip Code 20004-1701

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11.4114

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: PAGE 88 OF 126
(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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.4007

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL PAWNBROKERS ASSOCIATION INC POLITICAL ACT

Mailing Address PO BOX 508

City KELLER State TX Zip Code 76244-0508

FEC ID number of contributing federal political committee. **C C00307397**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2015

Transaction ID : SA11.4008

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION NR

Mailing Address 4301 WILSON BLVD

City ARLINGTON State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C C70005764**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3948

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: PAGE 89 OF 126
(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)
NATIONAL TURKEY FEDERATION POLITICAL ACTION COMMIT

Mailing Address 1225 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20005-6156

FEC ID number of contributing federal political committee. **C C00076182**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4099

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION C

Mailing Address 51 MADISON AVE
ROOM 1109

City State Zip Code
NEW YORK NY 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4094

Amount of Each Receipt this Period
4500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION C

Mailing Address 51 MADISON AVE
ROOM 1109

City State Zip Code
NEW YORK NY 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4103

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 126
	<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)
NORTH AMERICAN MEAT INSTITUTE POLITICAL ACTION COM

Mailing Address 1150 CONNECTICUT AVE NW
FL 12

City State Zip Code
D.C. DC 20036-4104

FEC ID number of contributing federal political committee. **C C00024281**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11.3955

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE

Mailing Address 600 13TH ST NW

City State Zip Code
D.C. DC 20005-3005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11.4038

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE

Mailing Address 600 13TH ST NW

City State Zip Code
D.C. DC 20005-3005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11.4042

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 91 OF 126
	<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	

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)
PROSPERITY ACTION, INC.

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314-1837

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11.4203

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address 101 S WASHINGTON SQUARE STE. 620

City LANSING State MI Zip Code 48933-1708

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11.4100

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
REACHING FOR A BRIGHTER AMERICA PAC

Mailing Address 1678 MONTGOMERY HWY STE 104-184

City BIRMINGHAM State AL Zip Code 35216-4914

FEC ID number of contributing federal political committee. **C C00487942**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11.4116

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 92 OF 126
(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)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE

Mailing Address **801 PENNSYLVANIA AVENUE NORTHWEST
SUITE 720**

City **WASHINGTON** State **DC** Zip Code **20004-2686**

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11.4098

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 06 / 2015

Transaction ID : SA11.4045

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHENS INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **111 CENTER STREET**

City **LITTLE ROCK** State **AR** Zip Code **72201-4402**

FEC ID number of contributing federal political committee. **C C00166553**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11.3905

Amount of Each Receipt this Period
5000.00
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 93 OF 126
	<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 GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COM

Mailing Address 101 CONSTITUTION AVE NW
STE 1000E

City WASHINGTON State DC Zip Code 20001-2171

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11.4053

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TYSON FOODS INC POLITICAL ACTION COMMITTEE (TYPAC)

Mailing Address SPRINGDALE

City CAMDEN State AR Zip Code 71701-

FEC ID number of contributing federal political committee. **C** C00169821

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11.4197

Amount of Each Receipt this Period
2500.00
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SA11.3954

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 94 OF 126
	<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)
UNITED PARCEL SERVICE, INC. PAC

Mailing Address 55 GLENLAKE PARKWAY

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2015

Transaction ID : SA11.4058

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG RD.
BLDG D3W

City SAN ANTONIO State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11.4120

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VOYA FINANCIAL, INC., POLITICAL ACTION COMMITTEE (

Mailing Address 230 PARK AVE

City NY State NY Zip Code 10169-0005

FEC ID number of contributing federal political committee. **C C00184028**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11.4015

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 95 OF 126
	<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)
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FA

Mailing Address SOUTH 6TH ST

City MINNEAPOLIS State MN Zip Code 55402-

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.4193

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FA

Mailing Address SOUTH 6TH ST

City MINNEAPOLIS State MN Zip Code 55402-

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11.4198

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

106329.83

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 126			
	<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. ALLISON JOHNSON			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015		
Mailing Address PO BOX 7841			Amount of Each Disbursement this Period 4500.00		
City LITTLE ROCK	State AR	Zip Code 72217	Transaction ID : SB17.I1405		
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ALLISON JOHNSON			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address PO BOX 7841			Amount of Each Disbursement this Period 271.85		
City LITTLE ROCK	State AR	Zip Code 72217	Transaction ID : SB17.I1416		
Purpose of Disbursement ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS		Category/ Type 006			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS		
State: District:					

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address 2600 CANTRELL ROAD			Amount of Each Disbursement this Period 271.85		
City LITTLE ROCK	State AR	Zip Code 72202	Transaction ID : SB17.I1533		
Purpose of Disbursement COPIES		Category/ Type	[MEMO ITEM] ITEMIZED REIMBURSEMENT PAYMENT ON 11/2/15		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	4771.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 126			
	<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. ALLISON JOHNSON			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015	
Mailing Address PO BOX 7841			Amount of Each Disbursement this Period 4500.00	
City LITTLE ROCK	State AR	Zip Code 72217	Transaction ID : SB17.I1417	
Purpose of Disbursement CONSULTING - FUNDRAISING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ALLISON JOHNSON			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015	
Mailing Address PO BOX 7841			Amount of Each Disbursement this Period 604.45	
City LITTLE ROCK	State AR	Zip Code 72217	Transaction ID : SB17.I1420	
Purpose of Disbursement ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		ITEMIZED REIMBURSEMENT - SEE MEMO ITEMS	
State: District:				

Full Name (Last, First, Middle Initial) C. US POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015	
Mailing Address 5420 KAVANAUGH BOULEVARD			Amount of Each Disbursement this Period 604.45	
City LITTLE ROCK	State AR	Zip Code 72207	Transaction ID : SB17.I1532	
Purpose of Disbursement POSTAGE		Category/ Type	[MEMO ITEM] ITEMIZED REIMBURSEMENT PAYMENT ON 10/7/15	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5104.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 126			
	<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. JOHN T. O'ROURKE			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 11028 STANMORE DRIVE			Amount of Each Disbursement this Period 1000.00
City POTOMAC	State MD	Zip Code 20854-1525	Transaction ID : SB17.4066
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND FOOD & BEVERAGE FOR FUNDRAISING EVENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 331.25
City LITTLE ROCK	State AR	Zip Code 72207	Transaction ID : SB17.I1406
Purpose of Disbursement CONTRACT LABOR		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. MRS. MISSY RICKELS			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 311 MCMILLEN TRAIL			Amount of Each Disbursement this Period 49.00
City LITTLE ROCK	State AR	Zip Code 72207	Transaction ID : SB17.I1415
Purpose of Disbursement REIMBURSEMENT - POSTAGE		Category/ Type	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1380.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 126			
	<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. ACLI CAPITOL VIEW & CONFERENCE CENTER			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 101 CONSTITUTION AVE NW 8TH FLOOR			Amount of Each Disbursement this Period 675.00
City WASHINGTON	State DC	Zip Code 20001	
Purpose of Disbursement FUNDRAISING - ROOM RENTAL		Candidate Name	Transaction ID : SB17.I1440
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. ACLI CAPITOL VIEW & CONFERENCE CENTER			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 101 CONSTITUTION AVE NW 8TH FLOOR			Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20001	
Purpose of Disbursement FUNDRAISING EVENT - CATERING & SERVICES		Candidate Name	Transaction ID : SB17.I1441
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) C. ADVANCE PRINT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 4201 S. SHACKLEFORD SUITE C			Amount of Each Disbursement this Period 208.51
City LITTLE ROCK	State AR	Zip Code 72204	
Purpose of Disbursement PRINTING SERVICES		Candidate Name	Transaction ID : SB17.I1398
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	3383.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. ADVANCE PRINT SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 4201 S. SHACKLEFORD SUITE C		Amount of Each Disbursement this Period 1033.32
City LITTLE ROCK	State AR Zip Code 72204	
Purpose of Disbursement PRINTING SERVICES	Category/Type	Transaction ID : SB17.I1418
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 150.18
City DALLAS	State TX Zip Code 75202	
Purpose of Disbursement TELEPHONE	Category/Type	Transaction ID : SB17.I1425
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 12 / 29 / 2015
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement SOFTWARE	Category/Type	Transaction ID : SB17.I1423
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1981.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 126			
	<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 11 / 30 / 2015
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I1424
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: 2016 <input checked="" type="checkbox"/> Primary <input 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 10 / 27 / 2015
Mailing Address 1593 SPRING HILL ROAD SUITE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I1426
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: 2016 <input checked="" type="checkbox"/> Primary <input 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 11 / 16 / 2015
Mailing Address 12450 AUTOMOBILE BOULEVARD		Amount of Each Disbursement this Period 960.00 Transaction ID : SB17.I1412
City CLEARWATER State FL Zip Code 33762	Purpose of Disbursement DIRECT MAIL SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2556.00
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 102 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. JAI LAMBERT		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 9 CONNELL DRIVE		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.I1400
City LITTLE ROCK	State AR	
Zip Code 72205	Purpose of Disbursement FUNDRAISING - DESIGN WORK	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MAGNA IV		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 2401 COMMERCIAL LANE		Amount of Each Disbursement this Period 1664.04 Transaction ID : SB17.I1399
City LITTLE ROCK	State AR	
Zip Code 72206	Purpose of Disbursement PIRNTING - CHRISTMAS CARD MAILING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MITCHELL WILLIAMS LAW		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 425 WEST CAPITOL AVENUE		Amount of Each Disbursement this Period 90.81 Transaction ID : SB17.I1401
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement COURIER SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2204.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 126	
	<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. MITCHELL WILLIAMS LAW			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015	
Mailing Address 425 WEST CAPITOL AVENUE			Amount of Each Disbursement this Period 76.00 Transaction ID : SB17.I1407	
City LITTLE ROCK	State AR	Zip Code 72201		
Purpose of Disbursement COURIER SERVICES				
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 11 / 05 / 2015	
Mailing Address 425 WEST CAPITOL AVENUE			Amount of Each Disbursement this Period 287.96 Transaction ID : SB17.I1443	
City LITTLE ROCK	State AR	Zip Code 72201		
Purpose of Disbursement PROFESSIONAL FEES - LEGAL				
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:				

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN CLUB OF CAPITOL HILL			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015	
Mailing Address 300 FIRST STREET			Amount of Each Disbursement this Period 854.89 Transaction ID : SB17.I1409	
City SE WASHINGTON	State DC	Zip Code 20003		
Purpose of Disbursement FOOD/BEVERAGE FOR EVENT				
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1218.85
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 104 OF 126	
	<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. NATIONAL REPUBLICAN CLUB OF CAPITOL HILL		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 300 FIRST STREET		Amount of Each Disbursement this Period 907.28 Transaction ID : SB17.I1410
City SE WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE FOR EVENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL REPUBLICAN CLUB OF CAPITOL HILL		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 300 FIRST STREET		Amount of Each Disbursement this Period 304.71 Transaction ID : SB17.I1413
City SE WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGE FOR EVENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1501 N. UNIVERSITY AVENUE		Amount of Each Disbursement this Period 405.36 Transaction ID : SB17.I1402
City LITTLE ROCK State AR Zip Code 72207	Purpose of Disbursement MONTHLY RENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	907.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 126	
	<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. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 1501 N. UNIVERSITY AVENUE		Amount of Each Disbursement this Period 438.54
City LITTLE ROCK State AR Zip Code 72207	Purpose of Disbursement MONTHLY RENT	
Candidate Name	Category/Type	Transaction ID : SB17.I1411
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PROSPECT BUILDING		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 1501 N. UNIVERSITY AVENUE		Amount of Each Disbursement this Period 423.50
City LITTLE ROCK State AR Zip Code 72207	Purpose of Disbursement MONTHLY RENT	
Candidate Name	Category/Type	Transaction ID : SB17.I1421
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 10 / 31 / 2015
Mailing Address P.O. BOX 26466		Amount of Each Disbursement this Period 938.17
City LITTLE ROCK State AR Zip Code 72221	Purpose of Disbursement CREDIT CARD PROCESSING FEES	
Candidate Name	Category/Type	Transaction ID : SB17.I1428
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1800.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 126			
	<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 11 / 30 / 2015
Mailing Address P.O. BOX 26466		Amount of Each Disbursement this Period 112.25
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I1430
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 12 / 31 / 2015
Mailing Address P.O. BOX 26466		Amount of Each Disbursement this Period 16.25
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I1442
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input 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 10 / 16 / 2015
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 1133.49
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS	Transaction ID : SB17.I1432
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENTS - SEE MEMO ITEMS
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1261.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 126	
	<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. AIRPORT PARKING

Mailing Address 1 AIRPORT DRIVE

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 16 / 2015

Amount of Each Disbursement this Period: 19.00

Transaction ID : SB17.I1452

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/16/2015

Full Name (Last, First, Middle Initial)
B. AMTRAK

Mailing Address 4300 GARDEN CITY DRIVE

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 16 / 2015

Amount of Each Disbursement this Period: 344.00

Transaction ID : SB17.I1456

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/16/2015

Full Name (Last, First, Middle Initial)
C. AVIS RENT-A-CAR

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 16 / 2015

Amount of Each Disbursement this Period: 104.59

Transaction ID : SB17.I1455

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 10/16/2015

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 126	
	<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. BEARNAISE		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 315 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 97.10
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEALS	Transaction ID : SB17.I1458
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015
State: District:		

Full Name (Last, First, Middle Initial) B. BEARNAISE		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 315 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 295.53
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEALS	Transaction ID : SB17.I1459
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015
State: District:		

Full Name (Last, First, Middle Initial) C. DC TAXI		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 12.30
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1457
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 126	
	<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. HILTON DALLAS/PARK CITIES		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 5954 LUTHER LANE		Amount of Each Disbursement this Period 51.96
City DALLAS State TX Zip Code 75225	Purpose of Disbursement TRAVEL	
Candidate Name		Transaction ID : SB17.I1454
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015

Full Name (Last, First, Middle Initial) B. MAILCHIMP		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 512 MEANS STREET, SUITE 404		Amount of Each Disbursement this Period 30.00
City ALTANTA State GA Zip Code 30318	Purpose of Disbursement INTERNET ADVERTISING	
Candidate Name		Transaction ID : SB17.I1453
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN CLUB OF CAPITOL HILL		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 300 FIRST STREET		Amount of Each Disbursement this Period 179.01
City SE WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEALS	
Candidate Name		Transaction ID : SB17.I1460
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 10/16/2015

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
French Hill for Arkansas

Full Name (Last, First, Middle Initial) A. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address P.O. BOX 22116			Amount of Each Disbursement this Period 55.15
City TULSA	State OK	Zip Code 74121	
Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I1433
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		CREDIT CARD PAYMENTS - SEE MEMO ITEMS
State: District:			

Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 208 SOUTH AKARD STREET			Amount of Each Disbursement this Period 55.15
City DALLAS	State TX	Zip Code 75202	
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : SB17.I1434
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT - 10/16/2015
State: District:			

Full Name (Last, First, Middle Initial) C. SECURITY BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address P.O. BOX 22116			Amount of Each Disbursement this Period 6089.44
City TULSA	State OK	Zip Code 74121	
Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS		Category/ Type	Transaction ID : SB17.I1435
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		CREDIT CARD PAYMENTS - SEE MEMO ITEMS
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	6144.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 126	
	<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. AMAZON

Mailing Address **440 TERRY AVE N**

City **SEATTLE** State **WA** Zip Code **98109**

Purpose of Disbursement
THANK YOU ITEMS FOR VOLUNTEERS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 13 / 2015

Amount of Each Disbursement this Period
235.84

Transaction ID : **SB17.I1473**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address **P.O. BOX 619616
MD 5675**

City **DFW AIRPORT** State **TX** Zip Code **75261**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 30 / 2015

Amount of Each Disbursement this Period
166.20

Transaction ID : **SB17.I1477**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
C. AMERICAN AIRLINES

Mailing Address **P.O. BOX 619616
MD 5675**

City **DFW AIRPORT** State **TX** Zip Code **75261**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 30 / 2015

Amount of Each Disbursement this Period
166.20

Transaction ID : **SB17.I1478**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

SUBTOTAL of Disbursements This Page (optional)..... **0.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 126	
	<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. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 4300 GARDEN CITY DRIVE		Amount of Each Disbursement this Period 14.75
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1465
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) B. AU BON PAIN		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address 19 FID KENNEDY AVENUE		Amount of Each Disbursement this Period 22.61
City BOSTON	State MA	
Zip Code 02210	Purpose of Disbursement MEALS	Transaction ID : SB17.I1469
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) C. AVIS RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 6 SYLVAN WAY		Amount of Each Disbursement this Period 10.01
City PARSIPPANY	State NJ	
Zip Code 07054	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1462
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
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 113 OF 126			
	<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. CAPITAL HOTEL		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 111 WEST MARKHAM		Amount of Each Disbursement this Period 3030.46
City LITTLE ROCK	State AR Zip Code 72201	
Purpose of Disbursement FUNDRAISING EVENT	Candidate Name	Transaction ID : SB17.I1475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial) B. DC TAXI		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2015
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 11.17
City WASHINGTON	State DC Zip Code 20002	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB17.I1476
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial) C. DC TAXI		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1636 BLADENSBURG ROAD		Amount of Each Disbursement this Period 10.90
City WASHINGTON	State DC Zip Code 20002	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB17.I1479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 126	
	<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. DOE'S EAT PLACE

Full Name (Last, First, Middle Initial)
Mailing Address 1023 W MARKHAM STREET

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2015

Amount of Each Disbursement this Period: 834.13

Transaction ID : SB17.I1474

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

B. EXPEDIA

Full Name (Last, First, Middle Initial)
Mailing Address 333 108TH AVENUE NE #300

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2015

Amount of Each Disbursement this Period: 525.55

Transaction ID : SB17.I1484

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

C. GOOGLE ADS

Full Name (Last, First, Middle Initial)
Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement INTERNET ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 05 / 2015

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.I1463

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 126			
	<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 INTERNET ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2015

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.I1483

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
B. HISTORIC ARKANSAS MUSEUM

Mailing Address 200 E 3RD STREET

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement THANK YOU ITEMS FOR VOLUNTEERS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 12 / 2015

Amount of Each Disbursement this Period: 41.80

Transaction ID : SB17.I1472

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
C. MAILCHIMP

Mailing Address 512 MEANS STREET, SUITE 404

City ALTANTA State GA Zip Code 30318

Purpose of Disbursement INTERNET ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 06 / 2015

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.I1467

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 126			
	<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. NYC TAXI		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 33 BEAVER STREET		Amount of Each Disbursement this Period 43.55
City NEW YORK CITY	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1468
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) B. NYC TAXI		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address 33 BEAVER STREET		Amount of Each Disbursement this Period 23.16
City NEW YORK CITY	State NY	
Zip Code 10004	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1470
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) C. PRET A MANGER		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 853 BROADWAY #701		Amount of Each Disbursement this Period 35.82
City NEW YORK	State NY	
Zip Code 10003	Purpose of Disbursement MEALS	Transaction ID : SB17.I1482
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 126			
	<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. PRET A MANGER

Mailing Address **853 BROADWAY #701**

City **NEW YORK** State **NY** Zip Code **10003**

Purpose of Disbursement
MEALS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 08 / 2015**

Amount of Each Disbursement this Period: **38.10**

Transaction ID : **SB17.I1485**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
B. THE ROOSEVELT HOTEL

Mailing Address **45 EAST 45TH ST. AT MADISON AVENUE**

City **NEW YORK CITY** State **NY** Zip Code **10017**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 08 / 2015**

Amount of Each Disbursement this Period: **755.22**

Transaction ID : **SB17.I1471**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial)
C. UBER

Mailing Address **800 MARKET STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94102**

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 06 / 2015**

Amount of Each Disbursement this Period: **6.54**

Transaction ID : **SB17.I1464**

[MEMO ITEM]
ITEMIZED CREDIT CARD PAYMENT 12/01/2015

SUBTOTAL of Disbursements This Page (optional) **0.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 126			
	<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. UBER		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 800 MARKET STREET		Amount of Each Disbursement this Period 20.97
City SAN FRANCISCO	State CA	
Zip Code 94102	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1466
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 800 MARKET STREET		Amount of Each Disbursement this Period 12.88
City SAN FRANCISCO	State CA	
Zip Code 94102	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1480
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
State: District:		

Full Name (Last, First, Middle Initial) C. YELLOW CAB COMPANY OF DC, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1636 BLADENSBURG RD. NE		Amount of Each Disbursement this Period 13.58
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I1481
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015
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 119 OF 126			
	<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 12 / 01 / 2015
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 55.15
City TULSA State OK Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS	
Candidate Name		Transaction ID : SB17.I1436
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	CREDIT CARD PAYMENTS - SEE MEMO ITEMS

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 55.15
City DALLAS State TX Zip Code 75202	Purpose of Disbursement TELEPHONE	
Candidate Name		Transaction ID : SB17.I1461
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/01/2015

Full Name (Last, First, Middle Initial) C. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 55.15
City TULSA State OK Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS	
Candidate Name		Transaction ID : SB17.I1437
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	CREDIT CARD PAYMENTS - SEE MEMO ITEMS

SUBTOTAL of Disbursements This Page (optional).....	110.30
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 126	
	<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 11 / 09 / 2015
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 55.15
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement TELEPHONE	Transaction ID : SB17.I1451
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/17/2015
State: District:		

Full Name (Last, First, Middle Initial) B. SECURITY BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 533.59
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENTS - SEE MEMO ITEMS	Transaction ID : SB17.I1438
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENTS - SEE MEMO ITEMS
State: District:		

Full Name (Last, First, Middle Initial) C. CHUY'S		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 16001 CHENAL PARKWAY		Amount of Each Disbursement this Period 33.59
City LITTLE ROCK	State AR	
Zip Code 72223	Purpose of Disbursement MEALS	Transaction ID : SB17.I1447
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/17/2015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	533.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 126			
	<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 11 / 25 / 2015
Mailing Address P.O. BOX 20706		Amount of Each Disbursement this Period 391.20
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Transaction ID : SB17.I1448	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/17/2015
State: District:		

Full Name (Last, First, Middle Initial) B. GOOGLE ADS		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 20.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement INTERNET ADVERTISING	Category/Type	
Candidate Name	Transaction ID : SB17.I1450	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/17/2015
State: District:		

Full Name (Last, First, Middle Initial) C. MAILCHIMP		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 512 MEANS STREET, SUITE 404		Amount of Each Disbursement this Period 30.00
City ALTANTA	State GA	Zip Code 30318
Purpose of Disbursement INTERNET ADVERTISING	Category/Type	
Candidate Name	Transaction ID : SB17.I1446	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/15/2015
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 122 OF 126	
	<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 11 / 30 / 2015
Mailing Address 5420 KAVANAUGH BOULEVARD		Amount of Each Disbursement this Period 58.80
City LITTLE ROCK	State AR	
Zip Code 72207	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I1449
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] ITEMIZED CREDIT CARD PAYMENT 12/17/2015
State: District:		

Full Name (Last, First, Middle Initial) B. SIMMONS FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 425 WEST CAPITOL		Amount of Each Disbursement this Period 77.75
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement BANK CHARGES	Transaction ID : SB17.I1427
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SIMMONS FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 425 WEST CAPITOL		Amount of Each Disbursement this Period 77.75
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement BANK CHARGES	Transaction ID : SB17.I1429
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	155.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 126	
	<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. SIMMONS FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 425 WEST CAPITOL		Amount of Each Disbursement this Period 77.75 Transaction ID : SB17.I1439
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement BANK CHARGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.I1397
City WASHINGTON State DC Zip Code 20003	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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE OORBEEK GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.I1403
City WASHINGTON State DC Zip Code 20003	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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5077.75
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 124 OF 126	
	<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 OORBEEK GROUP			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015	
Mailing Address 1000 NEW JERSEY AVENUE, SE #1016			Amount of Each Disbursement this Period 3161.17	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I1408	
Purpose of Disbursement REIMBURSEMENT PAYMENT - SEE MEMO ITEMS			REIMBURSEMENT PAYMENT - SEE MEMO ITEMS	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DEL FRISCO'S DOUBLE EAGLE			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address 950 I STREET NW, SUITE 501			Amount of Each Disbursement this Period 1726.28	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.I1486	
Purpose of Disbursement FUNDRAISING EVENT RENTAL & CATERING			[MEMO ITEM]	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		ITEMIZED REIMBURSEMENT PAYMENT 11/23/2015	
State: District:				

Full Name (Last, First, Middle Initial) C. RASIKA			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015	
Mailing Address 633 D ST., NW			Amount of Each Disbursement this Period 1434.89	
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SB17.I1487	
Purpose of Disbursement FUNDRAISING EVENT RENTAL & CATERING			[MEMO ITEM]	
Candidate Name			Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		ITEMIZED REIMBURSEMENT PAYMENT 11/23/2015	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3161.17
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 126 OF 126	
	<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 10 / 28 / 2015
Mailing Address 1201 WEST 6TH STREET		Amount of Each Disbursement this Period 15000.00
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement FILING FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I1419
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
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).....	15000.00
TOTAL This Period (last page this line number only).....	83445.64