Image# 15951187037				04/20/2015 10 : 37
FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 4
				ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
FRIENDS OF DA	NIFI SPARKS			
ADDRESS (number and street)	P.O. BOX 218			
(Check if address				
is changed)	BELMONT		MS 3882	27
			L⊥⊥ L⊥ STATE ▲	
COMMITTEE'S E-MAIL ADDRE	-99			
(Check if address		RKSFORCONGRESS.CC	DM	
is changed)				
	Optional Second E-Mail Add	Iress		1
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 04 / 2	0 / Y Y Y Y 2015			
3. FEC IDENTIFICATION N	UMBER ► C cc	00576256		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	PAUL G JARRELL			
Signature of Treasurer	L G JARRELL	[Electronically Filed]	Date 04	D D / Y Y Y Y 20 2015
NOTE: Submission of false, erron	eous, or incomplete information r ANY CHANGE IN INFORMATIO			penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYP	E OF C	COMMITTEE
Car	ndidate	e Committee:
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	ne of didate	
	didate y Affiliati	ion REP Office Sought: X House Senate President District 01
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	ne of didate	
Par	ty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party
Poli	itical A	Action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	nt Func	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

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Write or Type Committee Name

FRIENDS OF DANIEL SPARKS

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

N					
L					
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	l Organization	mmittee Joint Fundraisi	ng Representative	Leadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone	number optional) and po	sition of the person in p	oossession of committee
	PAUL G J/	ARRELL			
	Mailing Address	PO BOX 731			
				MS 38826	
	Title or Position	CITY		STATE	ZIP CODE
	1		Telephone n	umber 662 -	231 9529

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

Full Name	PAUL G JARRELL								
of Treasurer									
Mailing Address	PO BOX 731								
	TUPELO								
	CITY STATE ZIP CODE								
Title or Position									
$ \begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1$									

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																											
Mailing Address																											
																			L								
						CI	TΥ									ST/	λΤΕ				ZI	ΡC		θE			
Title or Position																											
											Tele	eph	ione	e ni	umt	ber											

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

Name	of	Bank,	Depository,	etc.
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MECH			
Mailing Address	2601 JACKSON AVE. W		
		MS	³⁸⁶⁵⁵
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE