

FEC
FORM 3

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

RECEIVED
FEC MAILCENTER
2025 NOV 18 PM 2:23

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Ethan for Arkansas

ADDRESS (number and street)

PO Box 214



Check if different
than previously
reported. (ACC)

Lewisville

AR

71845

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C 00916502

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

STATE ▼ DISTRICT

AR

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

03

03

2026

in the
State of

AR

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



General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2025

through

09

30

2025

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

Type or Print Name of Treasurer Theresa L. Tyree

Signature of Treasurer

Theresa L. Tyree

Date

10

12

2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Page 2

Write or Type Committee Name

Ethan for Arkansas

Report Covering the Period:

From:

07 / 01 / 2025

To:

09 / 30 / 2025

	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))	6,063.94	6,063.94
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6,063.94	6,063.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1,692.28	1,692.28
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1,692.28	1,692.28
8. Cash on Hand at Close of Reporting Period (from Line 27)	4,697.19	
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Page 3

Write or Type Committee Name

Ethan for Arkansas

Report Covering the Period:

From:

07 / 30 / 2025

To:

09 / 30 / 2025

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)

5,211.75

5,211.75

- (ii) Unitemized

1,127.72

1,127.72

- (iii) TOTAL of contributions from individuals ▶

6,339.47

6,339.47

- (b) Political Party Committees

0.00

0.00

- (c) Other Political Committees (such as PACs)

0.00

0.00

- (d) The Candidate

250.00

250.00

- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

6,589.47

6,589.47

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

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

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

6,589.47

6,589.47

20250930 11:40:11 AM

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

Page 4

II. DISBURSEMENTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

1,692.28

1,692.28

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

0.00

(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

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ►

1,692.28

1,692.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

50.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

6,589.47

25. SUBTOTAL (add Line 23 and Line 24).....

6,639.47

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

1,692.28

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

4,947.19

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 OF

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Ethan for Arkansas

Full Name (Last, First, Middle Initial)

A. Burns, James

Mailing Address

700 Glenloch Rd

City

Roopville

State

GA

Zip Code

30170

FEC ID number of contributing
federal political committee.

C 00916502

Name of Employer

Oak Leaf Farms

Occupation

Farmer

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3,500.00

Date of Receipt

MM / DD / YYYY
08 / 26 / 2025

Amount of Each Receipt this Period

3,500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dunbar, Emoni

Mailing Address

7099 North Hualapai Way

City

Las Vegas

State

NV

Zip Code

89166

FEC ID number of contributing
federal political committee.

C 00916502

Name of Employer

Harmony HC

Occupation

Therapist

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1,151.75

Date of Receipt

MM / DD / YYYY
09 / 24 / 2025

Amount of Each Receipt this Period

1,151.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Estes, Jon

Mailing Address

721 Chestnut St

City

Lewisville

State

AR

Zip Code

71845

FEC ID number of contributing
federal political committee.

C 00916502

Name of Employer

Lafayette County School

Occupation

Superintendent

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 25 / 2025

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

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 OF

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Ethan for Arkansas

Full Name (Last, First, Middle Initial)

A. ActBlue

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2025

Mailing Address

366 Summer Street

City

Boston

State

MA

Zip Code

02210

Purpose of Disbursement

Credit card processing fees

Candidate Name

Dunbar, Ethan

Category/
Type

FEC Identification Number

C 00916502

Amount of Each Disbursement this Period

275.53

Memo Item

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR

District:

Full Name (Last, First, Middle Initial)

B. Cadence Bank

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2025

Mailing Address

307 Spruce St

City

Lewisville

State

AR

Zip Code

71845

Purpose of Disbursement

Bank fee (paper statement)

Candidate Name

Dunbar, Ethan

Category/
Type

FEC Identification Number

C 00916502

Amount of Each Disbursement this Period

2.00

Memo Item

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR

District:

Full Name (Last, First, Middle Initial)

C. Cadence Bank

Date of Disbursement

M M / D D / Y Y Y Y
08 / 25 / 2025

Mailing Address

307 Spruce St

City

Lewisville

State

AR

Zip Code

71845

Purpose of Disbursement

Bank fee (address unknown)

Candidate Name

Dunbar, Ethan

Category/
Type

FEC Identification Number

C 00916502

Amount of Each Disbursement this Period

5.00

Memo Item

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR

District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

282.53

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

FOR LINE NUMBER:
(check only one)

☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Ethan for Arkansas

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election:

☐ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

☐ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M /

D D /

Y Y Y Y Y

M M /

D D /

Y Y Y Y Y

% (apr)

☐ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C.

NAME OF COMMITTEE (In Full) Ethan for Arkansas			FEC IDENTIFICATION NUMBER C00916502		
LENDING INSTITUTION (LENDER) Full Name			Amount of Loan		Interest Rate (APR)
Mailing Address			Date Incurred or Established		
City	State	Zip Code	Date Due		
A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred					
B. If line of credit, Amount of this Draw: Total Outstanding Balance:					
C. Are other parties secondarily liable for the debt incurred? ☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)					
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? ☐ No ☐ Yes If yes, specify: What is the value of this collateral? Does the lender have a perfected security interest in it? ☐ No ☐ Yes					
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: What is the estimated value?					
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: Address: Date account established: City, State, Zip:					
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.					
G. COMMITTEE TREASURER Typed Name THERESA L. TYREE Signature <i>Theresa Tyree</i>					DATE 10 / 12 / 2025
H. Attach a signed copy of the loan agreement.					
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.					
AUTHORIZED REPRESENTATIVE Typed Name Theresa L. Tyree Signature <i>Theresa Tyree</i>					DATE 10 / 12 / 2025
Title Treasure					

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE OF

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

Ethan for Arkansas

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶

2) TOTALS This Period (last page this line number only) ▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

3rd Quarter Reporting Summary

DONATION(S)/CONTRIBUTION(S):

Subtotal - \$104.00

Fee - \$4.00

Total - \$100.00

Fundraiser - Support Ethan for Arkansas

Type - One Time

Employer – Retired Navy

Occupation – Retired Navy

Donor - Steven Dunbar

Address – 5200 Emeryville Circle Ft Worth, TX 76244

Phone – (619) 990-9113

Date - Sep 30 08:22 PM

Subtotal - \$210.00

Fee - \$10.00

Total - \$250.00

Fundraiser - Support Ethan for Arkansas

Type – One-Time/Monthly

Employer – City of Lewisville

Occupation - Mayor

Donor - Ethan Dunbar

Address – PO Box 214 Lewisville, AR 71845

Phone – (719) 210-4544

Date - Sep 28 11:39 AM

Subtotal - \$52.88

Fee - \$2.88

Total - \$50.00

Fundraiser - Support Ethan for Arkansas

Type – Monthly

Employer – State of AR

Occupation - Data & Reporting Specialist

Donor - Christie Dunbar

Address – 1010 Chestnut Lewisville, AR 71845

Phone – (870) 949-8040

Date - Sep 27 03:33 PM

NON-PROFIT CORPORATION

Subtotal - \$100.00
Fee - \$4.00
Total - \$96.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Retired
Occupation - Retired
Donor - Oscar White
Address - 2004 Cheltenham Lane Columbia, SC 29223
Phone - (803) 741-8898
Date - Sep 26 10:10 AM

Subtotal - \$52.13
Fee - \$2.13
Total - \$50.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Self Employed
Occupation - Self Employed
Donor - Nicole Ford
Address - 3725 Grant Cove Jacksonville, AR 72076
Phone – (501) 960-1494
Date - Sep 24 03:54 PM

Subtotal - \$1,151.75
Fee - \$51.75
Total - \$1,100.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Harmony HC
Occupation - Therapist
Donor - Emoni Dunbar
Address - 7099 North Hualapai Way Las Vegas, NV 89166
Phone – (808) 726-1041
Date - Sep 23 07:08 PM

Subtotal - \$10.63
Fee - \$0.63
Total - \$10.00
Fundraiser - Support Ethan for Arkansas
Type -One Time
Employer – NA
Occupation - Retired
Donor - Trisha John
Address - 801 West St Kensett, AR 72082
Phone – (501) 365-6521
Date - Sep 18 06:27 PM

Subtotal - \$50.00
Fee - \$2.13
Total - \$47.87
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Retired
Occupation - Educator
Donor - Wanda White
Address - 2027 Highland Drive Wylue, TX 75098
Phone – (214) 536-5392
Date - Sep 08 10:47 PM

Subtotal - \$104.00
Fee - \$4.00
Total - \$100.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Retired
Occupation - DHS
Donor - Pris Hill
Address - 408 St Little Rock, AR 72210
Phone – (501) 351-7827
Date - Sep 08 09:36 AM

Date - Sep 06 09:12 PM

Date - Sep 03 10:36 AM

Date - Aug 29 04:44 PM

Subtotal - \$26.19
Fee - \$1.19
Total - \$25.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Baptist Health
Occupation - PAC
Donor - Ashley Dye
Address - 50 Fetch It Court Rineyville, KY 40162
Phone – (270) 501-0244
Date - Aug 29 04:15 PM

Subtotal - \$77.63
Fee - \$4.07
Total - \$73.56
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – Self Employed
Occupation - Jewelry Designer
Donor - Mark London
Address - 720 Old Brundage Road Hot Springs, AR 71913
Phone – (544) 591-2198
Date - Aug 28 03:58 PM

Subtotal - \$105.00
Fee - \$5.00
Total - \$100.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer – NA
Occupation - Retired
Donor - Evelyn Trammell
Address - PO Box 185 Lewisville, AR 71845
Phone – (816) 5503582
Date - Aug 28 12:38 PM

20250829 14:15:00 20250828 12:38:00 20250828 12:38:00

Subtotal - \$1.30
Fee - \$0.30
Total - \$1.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer - TDS
Occupation - Product Designer
Donor - Jasmine Thomas
Address - 5700 Willow Way North Little Rock, AR 72117
Phone - (501) 326-3815
Date - Aug 27 03:52 PM

Subtotal - \$10.73
Fee - \$0.73
Total - \$10.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer - Retired
Occupation - Disability
Donor - Lesa Knowlton
Address - 613 Warren Street Lewisville, AR 71845
Phone - (870) 703-3935
Date - Aug 27 02:47 PM

Subtotal - \$105.00
Fee - \$5.00
Total - \$100.00
Fundraiser - Support Ethan for Arkansas
Type - One Time
Employer - CSL
Occupation - Professional Learning Specialist
Donor - Virginia Perry
Address - 621 King Street Lewisville, AR 71845
Phone - (469) 406-3889
Date - Aug 27 02:29 PM

NOTES FOR ON BOARDING

****Total Contributions including fee(s) and in-kind = \$6,339.47**

Total - \$50.50
Fundraiser - Support Ethan for Arkansas
Type - One Time/Check #1223 Business Cards Purchase
Employer – Nevada County
Occupation – Library Director/Librarian
Donor – Theresa L. Tyree
Address – 1213 Section Line Ave Prescott, AR 71857
Phone – (816) 517-1690
Date – Sept 6 09:05 AM

EXPENSE(S):

Company Name - King Task Force
Description – Retainer for campaign support, strategy, & admin services
Address – PO Box 4803 Little Rock, AR 72214
Date – September 19, 2025
Amt: \$802.50
Payment Method – Check #97

Company Name - Up-Link
Description – Retainer for campaign support, strategy, & admin services
Address – PO BOX 1155 Benton, AR 72018
Date – September 30, 2025
Amt - \$274.75
Payment Method – Debit Card

Company Name - Canva
Description – Campaign Banner
Address – 3212 E. Cesar Chavez Street Austin, TX 78702
Date – September 24, 2025
Amt - \$282.00
Payment Method – Debit Card

Company Name – Cadence Bank
Description – Address unknown fee
Address – 307 Spruce St Lewisville, AR 71845
Date – August 25, 2025
Amt: \$5.00
Payment Method – Bank Fee

Company Name – Cadence Bank
Description – Paper statement fee
Address – 307 Spruce St Lewisville, AR 71845
Date – September 30, 2025
Amt: \$2.00
Payment Method – Bank Fee

Company Name – ActBlue/Stripe
Description – Automated Online Platform
Address – 366 Summer Street Boston, MA 02210
Date – September 30, 2025
Amt: \$275.53
Payment Method – Transaction/Processing Fee

****Including the \$50.50 In-Kind expense = \$1,692.28**

20250919 14:00:00

Name of Committee: Ethan for Arkansas
Address: PO Box 214 Lewisville, AR 71845
FEC Identification Number: C00916502
Covering Period: 07/01/2025 through 09/30/2025
Treasurer: Theresa Tyree

CASH SUMMARY:

Total Contribution: $\$50.00 + \$6339.47 + (-\$1,692.28) = \$4,697.19$

Total Operating Expenditures: $\$1,692.28$

Reporting: $\$4,697.19$

NOV 11 11:10 AM '25

NOV 18 2025 10 10 10 AM

RECEIVED
FEDERAL CENTER

2025 NOV 18 PM 2:24

U.S. POSTAGE PAID
FCM LG ENV
PRESCOTT, AR 71857
OCT 15, 2025
\$2.44
R2307M152534-06



20463

Retail



RDC 99

Federal Election Commission
1050 First St, Northwest
Washington, DC 20463

Mr. [unclear]
10 E. [unclear] Arkansas
P.O. Box 214
Gentryville, Arkansas
71845

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Date of Receipt
☒ USPS Registered/Certified	Postmarked (R/C) <i>10/15/25</i>
☐ USPS Priority Mail	Postmarked
☐ USPS Priority Mail Express	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
	Date of Receipt
	Next Business Day Delivery ☐
☐ Received via FAX	Date of Receipt
☐ Received via Email	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
 PREPARER	<i>11/19/2025</i> DATE PREPARED

(4/2023)

2025-11-19 10:10:10 AM