

2010 AUG 24 AM 11:02

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

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

Griffin Victory Joint Committee 2010

ADDRESS (number and street) P.O. Box 7526

(Check if address is changed) Little Rock AR 72217

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) cjv@timgriffinforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) N/A

2. DATE 08 / 04 / 2010

3. FEC IDENTIFICATION NUMBER C

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

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

Type or Print Name of Treasurer Todd Hart

Signature of Treasurer [Signature] Date 08 ' 08 ' 2010

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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

**FEC FORM 1**  
(Revised 02/2009)

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5. TYPE OF COMMITTEE (Check One)

**Candidate Committee:**

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

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

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

**Political Action Committee (PAC):**

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

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

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

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

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

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

**Joint Fundraising Representative:**

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

Committees Participating in Joint Fundraiser

- |    |   |               |   |           |
|----|---|---------------|---|-----------|
| 1. | REPUBLICAN PARTY OF ARKANSAS                | FEC ID number | C | C00084954 |
| 2. | TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE | FEC ID number | C | C00468116 |
| 3. | _____                                       | FEC ID number | C |           |
| 4. | _____                                       | FEC ID number | C |           |

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Write or Type Committee Name

**Griffin Victory Joint Committee 2010**

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

**NONE**

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

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

Full Name

**Bryan Jeffrey**

Mailing Address

**11300 Cantrell Road**

**Suite 301**

**Little Rock**

**AR**

**72212**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**Assistant Treasurer**

Telephone number **501 - 227 - 5800**

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

Full Name of Treasurer

**Todd Hart**

Mailing Address

**P.O. Box 7526**

**Little Rock**

**AR**

**72217**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**Treasurer**

Telephone number **501 - 607 - 3203**

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Full Name of Designated Agent

Jillian Yant

Mailing Address

11300 Cantrell Road

Suite 301

Little Rock

AR

72212

Title or Position

CITY

STATE

ZIP CODE

Designated Agent

Telephone number

501

227

5800

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.

Delta Trust & Bank

Mailing Address

11700 Cantrell Road

P.O. Box 17607

Little Rock

AR

72222

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

10030413077

Federal Election Commission  
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Jm H*  
 PREPARER

*8/24/10*  
 DATE PREPARED

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