

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)

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☒ 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)
CALHOUN, MICHAEL, , DR.,
Mailing Address 4020 RICHARDS ROAD

City
NORTH LITTLE ROCK

State
AR

Zip Code
72117-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARKANSAS SURGICAL HOSPITAL

Occupation
PHYSICIAN

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 22 2017

Transaction ID : SA11A.6939

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAMERON, NINA, , MRS.,
Mailing Address PO BOX 21440

City
LITTLE ROCK

State
AR

Zip Code
72221-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2017

Transaction ID : SA11A.6701

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAMERON, NINA, , MRS.,
Mailing Address PO BOX 21440

City
LITTLE ROCK

State
AR

Zip Code
72221-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2017

Transaction ID : SA11A.7010

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

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

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

5900.00