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## FEC FORM 2

## STATEMENT OF CANDIDACY

	( ) 1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (									
1.	(a) Name of Candidate (in full)									
	Hill, James, French, ,		No1. '£1.1			0.0	O  -	- November		
	(b) Address (number and street) PO Box 7841	☐ Check if address changed			Candidate's FEC Identification Number     H4AR02141					
	(c) City, State, and ZIP Code					3. Is This	New		ended	
	Little Rock		AF	7221	7	Statement	(N) O	R (A)		
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	rict of Candidate				
	REPUBLICAN PARTY	House			AR	02				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	French Hill for Arka	nsas								
(	(b) Address (number and street) P.O. Box 7841									
	(c) City, State, and ZIP Code									
	•				AR	72217				
	Little Rock				AN	12211				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
I	NOTE: This designation should be	filed with the pr	incipal campa	aign committ	ee.					
	(a) Name of Committee (in full)									
	Take Back the Hou	se 2022								
	(b) Address (number and street) PO Box 30844									
	1 0 000 30044									
	(c) City, State, and ZIP Code									
	Bethesda				MD	20824				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Sig	nature of Candidate					Date			-	
Hil	ll, James, French, ,			[Elec	tronically Filed]	05/28/2021				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>2</sup> of	2

## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	ereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my didacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)	Name of Committee (in full)								
	Financial Innovation Committee									
	(b) Address (number and street) 228 S. Washington Street Suite 115									
	(c) City, State, and ZIP Code									
	Alexandria	Α	22314							
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)									
	Team Hill									
	(b) Address (number and street) PO Box 7244									
	(c) City, State, and ZIP Code									
	Little Rock AR		72217							
8.	candidacy. NOTE: This designation should be filed with the principal campaign of (a) Name of Committee (in full)  Emmer Hill Committee									
	(b) Address (number and street) 824 S Milledge Ave Ste 101									
	(c) City, State, and ZIP Code									
	Athens GA	(	30605							
<ol> <li>I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on candidacy. NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> </ol>										
	(b) Address (number and street)									
	(c) City, State, and ZIP Code									