

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2014 APR 30 AM 11:18  
Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12 FEB 4 15 12 PM MAIL CENTER

KEN CROSS FOR PRESIDENT

ADDRESS (number and street)

P. O. BOX 4545



(Check if address is changed)

BATESVILLE

CITY

AR

STATE

72503-4545

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

PRESIDENT@KENCROSS.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

WWW.KENCROSS.COM

2. DATE

04 / 25 / 2014

3. FEC IDENTIFICATION NUMBER

C00446526

4. IS THIS STATEMENT



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

KENNETH R. CROSS

Signature of Treasurer

*Kenneth R. Cross*

Date

04 / 25 / 2014

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

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

FEC FORM 1  
(Revised 06/2012)

1403123253

5. TYPE OF COMMITTEE

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 KENNETH ROBERT CROSS

Candidate Party Affiliation REF Office Sought:  House  Senate  President State A.R.  
 (REFORM PARTY OF THE USA) District

- (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.		FEC ID number:	<u>C</u>
2.		FEC ID number:	<u>C</u>
3.		FEC ID number:	<u>C</u>
4.		FEC ID number:	<u>C</u>

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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

KENNETH ROBERT CROSS

Mailing Address

52 CAROL LN

BATESVILLE

AR

72501-0023

Title or Position

CITY

STATE

ZIP CODE

CHAIRMAN

Telephone number

870-251-5005

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

KENNETH ROBERT CROSS

Mailing Address

52 CAROL LN

BATESVILLE

AR

72501-0023

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

870-251-5005

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Full Name of Designated Agent

DONNA KAYE CROSS

Mailing Address

52 CAROL LN

BATESVILLE

CITY

AR

STATE

72501-0023

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

870-251-5005

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.

CITIZENS BANK

Mailing Address

P.O. BOX 2156

BATESVILLE

CITY

AR

STATE

72503-2156

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

1403123256

14031232257

NEWBETH R. CROSS  
32 CAROL LAM.  
BATESVILLE, AR 725

US MAIL PERMIT NO. 10000 BATESVILLE, AR



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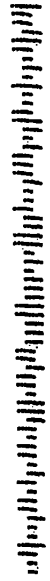
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FEDERAL ELECTION COMMISSION  
999 E STREET  
NW, WASHINGTON, DC 20463

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**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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	4/30/14 DATE PREPARED

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