FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Committee To Elect James Russell PO Box 55344 ADDRESS (number and street) (Check if address is changed) Little Rock 72215 AR CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address contact@russellforar.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.RussellForAR.com (Check if address is changed) DATE 01 2025 C00918136 FEC IDENTIFICATION NUMBER > 3. X 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 Barber, David, , Mr, Date 09 01 2025 Signature of Treasurer Barber, David, , Mr, NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	Form 1 (Revised 03/2022)	age 2					
	TYPE OF COMMITTEE:						
	Candidate Committee:						
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)							
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candid information below.)	late					
	Name of Candidate Russell, James, Richard, Mr, III						
	Candidate Party Affiliation DEM Office Sought: House X Senate President Distri	-					
	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
	Party Committee:						
	(National, State (Democratic, or subordinate) committee of the Republican, etc.) Page 1	arty					
Political Action Committee (PAC):							
	e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organi	zation is a:					
	Corporation Corporation w/o Capital Stock Labor Organizati	ion					
	Membership Organization Trade Association Cooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund o committee. (i.e., nonconnected committee)	r party					
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
(g) This committee is an independent expenditure-only political committee (Super PAC).							
	In addition, this committee is a Lobbyist/Registrant PAC.						
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	Joint Fundraising Representative:						
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds for two or more proceeds.	political					
	ommittees/organizations, at least one of which is an authorized committee of a federal candidate.						
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	oolitical					
	Committees Participating in Joint Fundraiser						
	1. C						

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V	Vrite or Type Committee Na				
		Elect James Russell			
6.		d Organization, Affiliated Committee, Joint Fundrais	ing Representative, or L	_eadership PAC Sponsor	
	NONE				
	Mailing Address				
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Relationship: Connec	cted Organization Affiliated Organization Joint F	fundraising Representative	Leadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Barber	, David, , Mr,			
	Full Name				
	Mailing Address	1721 Simms St			
		Conway	AR	72034	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Treasurer/Compliance	Telep	hone number 501	499 9897	
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 Barber of Treasurer	, David, , Mr,			
	or freasurer	1721 Simms St			
	Mailing Address				
		Conway	AR	72034	
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	Treasurer/Compliance	Telep	hone number 501		

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	Full Name of	(1.0.1.00.2 02.2000)		. age .		
	Designated Agent					
	Mailing Address					
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
		Telephone	number			
		Depositories: List all banks or other depositories in which the commes or maintains funds.	nittee deposits t	funds, holds accounts, rents		
ı	Name of Bank, Depository, etc.					
		Regions Bank				
	Mailing Address	5820 Asher Ave	1 1 1 1 1			
		Little Rock	AR	72204		
		CITY ▲	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.						
	Mailing Address					
		CITY ▲	STATE ▲	ZIP CODE ▲		