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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. **HUCK PAC** PO BOX 2008 ADDRESS (number and street) (Check if address is changed) LITTLE ROCK 72203 AR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cturner@hogantaylor.com (Check if address X is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.huckpac.com (Check if address is changed) DATE 08 2016 C00448373 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Turner, Cale, , , Type or Print Name of Treasurer Turner, Cale,,, [Electronically Filed] 17 2016 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FFO	Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE O	F COMMITTEE	. ugo <b>=</b>
Candid	ate 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. (Con information below.)	nplete the candidate
Name of Candidat	e	
Candidat Party Aff		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidat	e [	
Party C	committee:	(Danasa ::
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	I Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 secommittee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	ındraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1	L L L L L L L L L L L L L L L L L L L	
2	FEC ID number	
3	FEC ID number	
4		

Write or Type Committee	Revised 02/2009)	Page 3
HUCK PAC	;	
. Name of Any Conne	ected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Custodian of Record	ds: Identify by name, address (phone number optional) and position of the person in	Leadership PAC Sponso
books and records.		
Tu Full Name	urner, Cale, , ,	
Mailing Address	10800 Financial Center Pkwy	
	Ste 300	
	Little Rock AR 7221	1
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 501 -	247 - 4343
Treasurer: List the na	ame and address (phone number optional) of the treasurer of the committee; and the t (e.g., assistant treasurer).	
Treasurer: List the na any designated agent	ame and address (phone number optional) of the treasurer of the committee; and the	
Treasurer: List the na any designated agent  Full Name Tur	ame and address (phone number optional) of the treasurer of the committee; and the t (e.g., assistant treasurer).	
Treasurer: List the na any designated agent  Full Name Tur of Treasurer	ame and address (phone number optional) of the treasurer of the committee; and the t (e.g., assistant treasurer).	
Treasurer: List the na any designated agent  Full Name Tur of Treasurer	ame and address (phone number optional) of the treasurer of the committee; and the t (e.g., assistant treasurer).  Inner, Cale, , ,	name and address of
Treasurer: List the na any designated agent  Full Name Tur of Treasurer	ame and address (phone number optional) of the treasurer of the committee; and the t (e.g., assistant treasurer).  Inner, Cale, , ,  Ste 300	name and address of

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Full Name of Designated Agent	Turner, Megan, , ,	
Mailing Address	10800 Financial Center Pkwy	
	Ste 300	
	Little Rock  CITY  STATE  ZI	P CODE
Title or Position Assistant Treasu	rier	2 3945
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds axes or maintains funds.	accounts, rents
Name of Bank, D		
Name of Bank, D	Centennial Bank	
	Centennial Bank	
	Centennial Bank	
	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223	IP CODE
	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223  CITY STATE ZI	IP CODE
Mailing Address	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223  CITY STATE ZI	IP CODE
Mailing Address	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223  CITY STATE ZI	IP CODE
Mailing Address  Name of Bank, D	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223  CITY STATE ZI	IP CODE
Mailing Address  Name of Bank, D	Centennial Bank  13910 Cantrell Road  Little Rock  AR 72223  CITY STATE ZI	IP CODE