

REPORT OF RECEIPTS AND DISBURSEMENTS

For an Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

C00329193	621704692	2. FEC IDENTIFICATION NUMBER C00329193
Hannah Vogler		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Judy Smith for Congress		
637 Scales St.	Arkansas/Fourth	
Camden, AR 71701		

4. TYPE OF REPORT

- ☒ April 15 Quarterly Report ☐ Twelfth day report preceding _____
election on _____ in the State of _____
☐ July 15 Quarterly Report ☐ Thirtieth day report following the General Election on
_____ in the State of _____
☐ October 15 Quarterly Report ☐ Termination Report
☐ January 31 Year End Report
☐ July 31 Mid-Year Report
- activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period <u>01-01-98</u> through <u>03-31-98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (from Line 11(e))	\$20,263.00	\$20,263.00
(b) Total Contribution Refunds (from Line 20(d))	\$288.40	\$288.40
(c) Net Contributions (Line 6(b) from Line 6(a))	\$19,974.60	\$19,974.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$21,231.23	\$21,231.23
(b) Total Offsets to Operating Expenditures (from 14)	\$273.01	\$273.01
(c) Net Operating Expenditures (Line 7(a) - Line 7(b))	\$20,958.22	\$20,958.22
8. Cash on Hand at Close of Reporting Period (Line 27)	\$6,341.74	Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530
9. Debts and Obligations Owed TO the Committee		
10. Debts and Obligations Owed BY the Committee	\$951.96	

I certify that I have examined this report and it is correct and complete.

Type or Print Name of Treasurer

Alvernon McHenry

Signature of Treasurer

Date

4-14-98

NOTE: Submission of false, erroneous, or incomplete information may subject signer to penalties.

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FEC FORM 3

**DETAILED SUMMARY PAGE
of Receipts and Disbursements**

Judy Smith for Congress		C00329193	from 01-01-98	to 03-31-98
I. RECEIPTS			COLUMN A This Period	COLUMN B Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (Use Schedule A)			\$8,000.00	
(ii) Unitemized			\$10,113.00	
(iii) Total of contributions from individuals			\$18,113.00	\$16,113.00
(b) Political Party Committees			\$4,000.00	\$4,000.00
(c) Other Political Committees (such as PACs)				
(d) The Candidate			\$150.00	\$150.00
(e) TOTAL CONTRIBUTIONS (11(a)(iii)+(b)+(c)+(d))			\$20,263.00	\$20,263.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
13. LOANS:				
(a) Made or Guaranteed by the Candidate				
(b) All Other Loans				
(c) TOTAL LOANS (add 13(a) and (b))				
14. OFFSETS TO OPERATING EXPENDITURES (refunds, etc.) ..			\$273.01	\$273.01
15. OTHER RECEIPTS (Dividends, Interest, etc.)			\$977.11	\$977.11
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)			\$21,513.12	\$21,513.12
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES			\$21,231.23	\$21,231.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES				
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate				
(b) Of All Other Loans				
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))				
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals, Persons Other than Political Committees ..			\$288.40	\$288.40
(b) Political Party Committees				
(c) Other Political Committees (such as PACs)				
(d) TOTAL CONTRIBUTION REFUNDS (20(a) + (b) + (c))			\$288.40	\$288.40
21. OTHER DISBURSEMENTS				
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) ..			\$21,519.63	\$21,519.63
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD				\$6,348.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)				\$21,513.12
25. SUBTOTAL (add Line 23 and Line 24)				\$27,861.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)				\$21,519.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Line 25 - Line 26)				\$6,341.74

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

PAGE 1 OF 2

**FOR LINE NUMBER
11(a)(i)**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Carolyn Izard 806 Mills Park Rd Bryant, AR 72022	Name of Employer Little Rock Family Plann	Date 01-26-98	Amount this pd. \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Nurse	Year-to-Date > \$300.00	
B. Full Name, Mailing Address and ZIP Code Venie Craig 500 E. 9th St. El Dorado, AR 71730	Name of Employer N/A	Date 01-16-98	Amount this pd. \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Year-to-Date > \$250.00	
C. Full Name, Mailing Address and ZIP Code Claudell Woods P.O. Box 187 Magnolia, AR 71752	Name of Employer self	Date 01-14-98	Amount this pd. \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Year-to-Date > \$300.00	
D. Full Name, Mailing Address and ZIP Code Beverly Thomas 8330 Cantrell Little Rock, AR 72227	Name of Employer UAMS	Date 01-06-98	Amount this pd. \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Year-to-Date > \$250.00	
E. Full Name, Mailing Address and ZIP Code Sharon Pallone 224 Pallone Lane Rose Bud, AR 72137	Name of Employer SCAN	Date 01-06-98	Amount this pd. \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Year-to-Date > \$250.00	
F. Full Name, Mailing Address and ZIP Code Joe Todd 810 S. Jackson Magnolia, AR 71753	Name of Employer self	Date 01-13-98	Amount this pd. \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Funeral Director	Year-to-Date > \$500.00	
G. Full Name, Mailing Address and ZIP Code Janet Pulliam 15 Pinnacle Little Rock, AR 72205-2715	Name of Employer Self-employed	Date 02-12-98	Amount this pd. \$500.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Atty	Year-to-Date > \$500.00	

SUBTOTAL of Receipts This Page (optional) >

\$2,350.00

TOTAL This Period (last page this line number only) >

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

PAGE 2 OF 2

**FOR LINE NUMBER
11(a)(i)**

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code James Moore 200 South University Ave., Ste. 200 Little Rock, Ar 72205	Name of Employer Self-employed	Date 02-12-98	Amount this pd. \$250.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dentist	Year-to-Date > \$250.00	
B. Full Name, Mailing Address and ZIP Code Woodson Walker 217 West 2nd Street Little Rock, Ar 72201	Name of Employer Self-employed	Date 02-12-98	Amount this pd. \$250.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Year-to-Date > \$250.00	
C. Full Name, Mailing Address and ZIP Code Dan Pless 901 Carpenter Street Arkadelphia, AR 71923	Name of Employer Ar Fair Housing Council	Date 02-12-98	Amount this pd. \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Year-to-Date > \$250.00	
D. Full Name, Mailing Address and ZIP Code Anthony Kidd 1709 Thomas Rd Williamsport, PA 17701	Name of Employer International Paper	Date 03-09-98 03-23-98	Amount this pd. \$250.00 \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Acctg Mgr	Year-to-Date > \$400.00	
E. Full Name, Mailing Address and ZIP Code Dr. Alonzo Williams 8906 Kanis Road Little Rock, AR 72205	Name of Employer Self-employed	Date 03-18-98	Amount this pd. \$500.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Year-to-Date > \$500.00	
F. Full Name, Mailing Address and ZIP Code Mr. Larry Townes Hwy 82 & 28 Lewisville, AR 71845	Name of Employer Townes Telecommunication	Date 03-18-98	Amount this pd. \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Year-to-Date > \$1,000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Johnny Ross Hwy 82 & 28 Lewisville, AR 71845	Name of Employer Townes Telecommunication	Date 03-18-98	Amount this pd. \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation General Manager	Year-to-Date > \$1,000.00	

SUBTOTAL of Receipts This Page (optional) > **\$3,650.00**

TOTAL This Period (last page this line number only) > **\$6,000.00**

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 1 OF 1

Contributions from Political Party Committees

FOR LINE NUMBER
11(b)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Democrat Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Name of Employer Occupation	Date 03-24-98	Amount this pd. \$2,000.00 IN-KIND polling
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date > \$2,000.00		
B. Full Name, Mailing Address and ZIP Code (same as above)	Name of Employer Occupation	Date 02-27-98	Amount this pd. \$2,000.00 IN-KIND polling
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date > \$4,000.00		
C. Full Name, Mailing Address and ZIP Code 	Name of Employer Occupation	Date 	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
D. Full Name, Mailing Address and ZIP Code 	Name of Employer Occupation	Date 	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
E. Full Name, Mailing Address and ZIP Code 	Name of Employer Occupation	Date 	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
F. Full Name, Mailing Address and ZIP Code 	Name of Employer Occupation	Date 	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
G. Full Name, Mailing Address and ZIP Code 	Name of Employer Occupation	Date 	Amount this pd.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
SUBTOTAL of Receipts This Page (optional) >			\$4,000.00
TOTAL This Period (last page this line number only) >			\$4,000.00

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 1 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)
Judy Smith for Congress

C00329183

A. Full Name, Mailing Address and ZIP Code Joe, M. Hill 1821 Fair Park Blvd. Little Rock, AR 72204	Name of Employer Arkansas Department of He	Date 01-17-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bureau Director		
	Year-to-Date >	\$100.00	
B. Full Name, Mailing Address and ZIP Code Gloria Abaagye 1823 South Grant Street Little Rock, AR 72204	Name of Employer Div. of Children and Fami	Date 01-17-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Technical Coordina		
	Year-to-Date >	\$25.00	
C. Full Name, Mailing Address and ZIP Code Fraulene D. Rogers 504 Adams Ave, NW Camden, AR 71701	Name of Employer Williams Funeral Home	Date 01-16-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Funeral Director		
	Year-to-Date >	\$200.00	
D. Full Name, Mailing Address and ZIP Code Donald E. Bishop 812 Skyline Dr. Harrison, AR 72601	Name of Employer self	Date 01-27-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$100.00	
E. Full Name, Mailing Address and ZIP Code Nora D. Ferguson 1105 Scenic Way Benton, AR 72015	Name of Employer Information Requested	Date 01-27-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$25.00	
F. Full Name, Mailing Address and ZIP Code Mary R. Alexander 109 S. Martin Little Rock, AR 72205	Name of Employer self	Date 01-27-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Midwife & RN		
	Year-to-Date >	\$20.00	
G. Full Name, Mailing Address and ZIP Code Vickie Rene' Garner 117 Sunrise Hot Springs, AR 71913	Name of Employer self	Date 01-07-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation video store mgr		
	Year-to-Date >	\$20.00	

SUBTOTAL of Receipts This Page (optional) >

\$490.00

TOTAL This Period (last page this line number only) >

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 2 OF 28

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Beth Brickell P.O. Box 119 Paran, AR 72122	Name of Employer Luminous Films(self)	Date 01-05-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Filmmaker		
B. Full Name, Mailing Address and ZIP Code Clara Armstrong 784 N. Sewaye Lane Bishop, CA 93514	Name of Employer Information Requested	Date 01-05-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
C. Full Name, Mailing Address and ZIP Code Caddis Woodard 830 Sharp St. #3D Camden, AR 71701	Name of Employer Information Requested	Date 01-05-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
D. Full Name, Mailing Address and ZIP Code Wanda Brewer Stephens 1177 E. Ridgeway Dr Fayetteville, AR 72701	Name of Employer Information Requested	Date 01-02-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife		
E. Full Name, Mailing Address and ZIP Code Dorothy P. Westerland 3813 Lakeshore Dr. North Little Rock, AR 72116	Name of Employer Information Requested	Date 01-07-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
F. Full Name, Mailing Address and ZIP Code Mary A. Gillihan HC 72 Box 219A Mtn View, AR 72560	Name of Employer Information Requested	Date 01-02-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
G. Full Name, Mailing Address and ZIP Code Susan Conley 4116 Longview Little Rock, AR 72212	Name of Employer self	Date 01-04-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
SUBTOTAL of Receipts This Page (optional)	Year-to-Date >	\$100.00	\$335.00
TOTAL This Period (last page this line number only)	Year-to-Date >		-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 3 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00328193

A. Full Name, Mailing Address and ZIP Code David L. Rickard 315 Auburn Drive Little Rock, AR 72205	Name of Employer UAMS Dept of Pediatrics	Date 01-04-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Policy Analyst	Year-to-Date > \$100.00	
B. Full Name, Mailing Address and ZIP Code Jeannie Fetting 3069 Lakeside Drive Benton, AR 72015	Name of Employer self	Date 01-04-88	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housing Consultant	Year-to-Date > \$50.00	
C. Full Name, Mailing Address and ZIP Code Betty Brantley 3210 Edgerstoune Lane Little Rock, AR 72205	Name of Employer Retired	Date 01-08-88	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
D. Full Name, Mailing Address and ZIP Code Jay Bradford P.O. Box 8367 Pine Bluff, AR 71611	Name of Employer Information Requested	Date 01-27-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
E. Full Name, Mailing Address and ZIP Code Les Jeune Amies Circle 782 Lincoln SW Camden, AR 71701	Name of Employer Information Requested	Date 01-15-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
F. Full Name, Mailing Address and ZIP Code Minerva W. Daniels 2600 Mt. Holly Camden, AR 71701	Name of Employer Information Requested	Date 01-09-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
G. Full Name, Mailing Address and ZIP Code Charles George 1411 Davis Lane Batesville, AR 72501	Name of Employer Information Requested	Date 01-16-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
SUBTOTAL of Receipts This Page (optional) >			\$575.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 4 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(II)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Larry Goodwin P.O. Box 129 Cave City, AR 72521	Name of Employer Information Requested	Date 01-23-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
B. Full Name, Mailing Address and ZIP Code Cleovies Hodges 324 Clifton Camden, AR 71701	Name of Employer Information Requested	Date 01-14-98	Amount this pd. \$30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
C. Full Name, Mailing Address and ZIP Code Charlotte John 34 Cimarron Valley Cir Little Rock, AR 72212	Name of Employer Information Requested	Date 01-25-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
D. Full Name, Mailing Address and ZIP Code Sherry Miller 212 Bellaire Dr. Hot Springs, AR 71901	Name of Employer Information Requested	Date 01-26-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
E. Full Name, Mailing Address and ZIP Code William Rudledge 264 River Ridge Pt Little Rock, AR 72227	Name of Employer Information Requested	Date 01-20-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
F. Full Name, Mailing Address and ZIP Code Vanessa Sykes 74 Somerset North Little Rock, AR 72116	Name of Employer Information Requested	Date 01-13-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
G. Full Name, Mailing Address and ZIP Code Cheryl L. Vinas 2005 Broken Bow North Little Rock, AR 72116	Name of Employer Information Requested	Date 01-21-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
SUBTOTAL of Receipts This Page (optional) >			\$655.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 5 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Willie Watson 1143 Abraham Ave Ville Platte, LA 70586	Name of Employer Information Requested	Date 01-21-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
B. Full Name, Mailing Address and ZIP Code Ann E. Wynngate 2049 Sunshine Rd Fayetteville, AR 72704	Name of Employer Information Requested	Date 01-29-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
C. Full Name, Mailing Address and ZIP Code Patricia S. Armstrong 501 E. Busbee Apt #13 East Camden, AR 71701	Name of Employer Information Requested	Date 01-29-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
D. Full Name, Mailing Address and ZIP Code Carol Rudder 250 Emmerson Camden, AR 71701	Name of Employer Information Requested	Date 01-30-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
E. Full Name, Mailing Address and ZIP Code Dennis Parker 870 Hwy 79N McNeil, AR 71752	Name of Employer Information Requested	Date 02-05-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
F. Full Name, Mailing Address and ZIP Code Michael E. Suttle 159 Ouachita 593 Rd. Camden,, Ar 71701	Name of Employer Dept. Of Human Services	Date 02-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Worker		
G. Full Name, Mailing Address and ZIP Code PATRICK J. STAIR P.O. BOX 1346 LITTLE ROCK, AR 72203	Name of Employer STATE OF ARKANSAS	Date 02-09-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SYSTEM MANAGER		
SUBTOTAL of Receipts This Page (optional)	Year-to-Date >	\$20.00	\$275.00
TOTAL This Period (last page this line number only)	Year-to-Date >	\$25.00	-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 6 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code ODESSA B. TALLEY 1107 SOUTH CLEVELAND LITTLE ROCK, AR 72204	Name of Employer Information Requested	Date 02-09-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED		
B. Full Name, Mailing Address and ZIP Code PAT LILE 1305 COVE VIEW LANE LITTLE ROCK, AR 72211-2244	Name of Employer AR. COMMUNITY FOUNDATION	Date 02-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FOUNDATION EXECUTIVE		FUNDRAISED
C. Full Name, Mailing Address and ZIP Code WILLIE OATES P.O. BOX 24006 LITTLE ROCK, AR 72221	Name of Employer Information Requested	Date 02-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VOLUNTEER		FUNDRAISED
D. Full Name, Mailing Address and ZIP Code CATHERINE TOWBIN 16 BROADVIEW DRIVE LITTLE ROCK, AR 72207-5114	Name of Employer Information Requested	Date 02-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED		FUNDRAISED
E. Full Name, Mailing Address and ZIP Code James C Manley 796 Scales Camden, AR 71701	Name of Employer Self-employed	Date 02-11-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Barber		
F. Full Name, Mailing Address and ZIP Code Joa Molinaro 202 Country Club Sherwood, AR 72120	Name of Employer CheckAlert	Date 02-11-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self employed		FUNDRAISED
G. Full Name, Mailing Address and ZIP Code Charlotte Schexnayder P.O. Box 220 Dumas, AR 71639	Name of Employer Clarion Publishing	Date 02-11-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Publishing		FUNDRAISED
SUBTOTAL of Receipts This Page (optional) >	\$500.00		
TOTAL This Period (last page this line number only) >	-----		

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 7 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Bill Gwatney P.O. Box 156 Jacksonville, AR 72076	Name of Employer Self employer	Date 02-11-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer		
B. Full Name, Mailing Address and ZIP Code Shirley Pine 7417 Fairways Drive Little Rock, AR 72204-8427	Year-to-Date >	\$100.00	
	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$25.00
	Occupation Info Requested		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$25.00	
C. Full Name, Mailing Address and ZIP Code Dee Bennett 5205 South Woodland Drive North Little Rock, AR 72117-8434	Name of Employer Information Requested	Date 02-17-98	Amount this pd. \$200.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation State Representative		
D. Full Name, Mailing Address and ZIP Code Wanda Northcutt P.O. Box Stuttgart, AR 72160	Year-to-Date >	\$200.00	
	Name of Employer Information Requested	Date 02-10-98	Amount this pd. \$50.00 FUNDRAISED
	Occupation Info Requested		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$50.00	
E. Full Name, Mailing Address and ZIP Code Percy Malone 518 Clay Street Arkadelphia, AR 71923	Name of Employer NCS & WP Malone Inc.	Date 02-12-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pharmacist		
F. Full Name, Mailing Address and ZIP Code Cindy Patterson 711 North Ash. #5 Little Rock, AR 72205	Year-to-Date >	\$100.00	
	Name of Employer ACAAA	Date 02-12-98	Amount this pd. \$25.00 FUNDRAISED
	Occupation Asn. Director		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$25.00	
G. Full Name, Mailing Address and ZIP Code Bruce Moore P.O. Box Little Rock, AR 72221	Name of Employer City of Little Rock	Date 02-12-98	Amount this pd. \$200.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. City Manager		
Year-to-Date >	\$200.00		

SUBTOTAL of Receipts This Page (optional) >

\$700.00

TOTAL This Period (last page this line number only) >

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 8 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Walter Clancy 2510 Hidden Valley Drive Little Rock, AR 72212	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$25.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
B. Full Name, Mailing Address and ZIP Code Mary Dillard 12 Normandy Road Little Rock, AR 72207	Name of Employer Information Requested	Date 02-12-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$50.00	Amount this pd. \$50.00 FUNDRAISED
C. Full Name, Mailing Address and ZIP Code Dorothy Nyles 400 North University Avenue Little Rock, Ar 72205	Name of Employer New Futures	Date 02-12-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Policy	Year-to-Date > \$200.00	
D. Full Name, Mailing Address and ZIP Code Daphne McBeth 8616 Shiloh Drive Mablevale, AR 72103	Name of Employer Alta	Date 02-12-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
E. Full Name, Mailing Address and ZIP Code Eplurivus West 1501 North 7th Street Fort Smith, Ar 72901	Name of Employer Information Requested	Date 02-12-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$10.00	Amount this pd. \$10.00 FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Jacquelyn Stewart 1502 Green Mountain Drive Little Rock, AR 72211	Name of Employer Information Requested	Date 02-12-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
G. Full Name, Mailing Address and ZIP Code Owens Freeman 2311 Forest Creek Drive Little Rock, Ar 72211-4552	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
SUBTOTAL of Receipts This Page (optional) >			
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Leon J. Johnson 1500 West Main Ste.7 Jacksonville, Ar 72076	Name of Employer Information Requested Attorney	Date 02-12-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date > \$100.00		
B. Full Name, Mailing Address and ZIP Code Pat Pappas 2901 Willow Pine Bluff, Ar 71603-5061	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$50.00		
C. Full Name, Mailing Address and ZIP Code Brooks Gibson 8911 Leatrice Little Rock, AR 72207	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$100.00		
D. Full Name, Mailing Address and ZIP Code George Ivory 806 West 2nd Street Little Rock, AR 72201	Name of Employer Information Requested Attorney	Date 02-12-98	Amount this pd. \$200.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$200.00		
E. Full Name, Mailing Address and ZIP Code Alder Moore 2024 Arkansas Valley, Bldg 3 Ste.306 Little Rock, AR 72212	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor Year-to-Date > \$50.00		
F. Full Name, Mailing Address and ZIP Code Margaret Baker 150 Columbia 35 Magnolia, AR 71753	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$25.00		
G. Full Name, Mailing Address and ZIP Code Patricia Youngdahl 7108 Rockwood Road Little Rock, AR 72207	Name of Employer UAMS	Date 02-12-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychologist Year-to-Date > \$50.00		
SUBTOTAL of Receipts This Page (optional) >			\$575.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 10 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Alpha Kappa Alpha Sorority P.O. Box 1323 Camden, Ar 71701	Name of Employer Information Requested	Date 02-12-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
B. Full Name, Mailing Address and ZIP Code Shirley Freeman 6111 North Hill Blvd. Sherwood, AR 72116-4564	Name of Employer Information Requested	Date 02-15-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor		FUNDRAISED
C. Full Name, Mailing Address and ZIP Code Lucian Lee 152 Ouachita Road 477 Camden, AR 71701	Name of Employer Salvation Army	Date 02-19-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Service Unit Representat		
D. Full Name, Mailing Address and ZIP Code Francisco Batres 500 S. University, Ste 218 Doctors Bldg. Little Rock, AR 72205	Name of Employer Self-employed	Date 02-19-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
E. Full Name, Mailing Address and ZIP Code John E. Green 44 Lakeside Drive Little Rock, AR 72204	Name of Employer Roche Laboratories Inc.	Date 02-19-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Medical Center Represent		
F. Full Name, Mailing Address and ZIP Code Alpha Rho Charter - UAPB 104 W 37TH Pine Bluff, AR 71603-6717	Name of Employer Information Requested	Date 02-23-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
G. Full Name, Mailing Address and ZIP Code Betty Newman 500 Avenue A Opelousas, LA 70570	Name of Employer Information Requested	Date 02-23-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
SUBTOTAL of Receipts This Page (optional) >			\$795.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Marion Fulk 315 Crystal Ct Little Rock, AR 72205	Name of Employer Dean Witter	Date 02-23-98	Amount this pd. \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Stockbroker		
B. Full Name, Mailing Address and ZIP Code Sharon Hawkins 1436 Vera Street Camden, AR 71701	Name of Employer M & P Bank	Date 02-25-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bank Teller		
C. Full Name, Mailing Address and ZIP Code Margaret Kolb 224 Colonial Court Little Rock, AR 72205	Name of Employer Information Requested	Date 02-25-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
D. Full Name, Mailing Address and ZIP Code Sarah Lodge P.O. Box 7827 Little Rock, AR 72217	Name of Employer Information Requested	Date 02-25-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
E. Full Name, Mailing Address and ZIP Code Judy Pridgen 810 Greenhill Road Benton, AR 72015	Name of Employer Saline county	Date 02-27-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Saline Co Sheriff		FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Janet Perkins 2404 Gaines Apt. 2 Little Rock, AR 72206	Name of Employer Women's Project	Date 02-27-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director		
G. Full Name, Mailing Address and ZIP Code Desiree Taylor 3322 Mt. Holly Camden, AR 71701	Name of Employer Information Requested	Date 02-10-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
SUBTOTAL of Receipts This Page (optional)		>	\$385.00
TOTAL This Period (last page this line number only)		>	-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Ruby Utsey 367 Hildreth Camden, AR 71701	Name of Employer Information Requested	Date 02-27-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
B. Full Name, Mailing Address and ZIP Code Mary Jo Rogers Rt. 1, Box 269 Stamps, AR 71860	Name of Employer Farmer	Date 02-27-98	Amount this pd. \$15.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation self-employed		
C. Full Name, Mailing Address and ZIP Code Dr. Audie Teague 105 Friar Tuck Lane Prescott, AR 71857	Name of Employer Doctor	Date 02-27-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self-employed		
D. Full Name, Mailing Address and ZIP Code Christina Turner P.O. Box 834 Lewisville, AR 71845	Name of Employer Nurse Aide	Date 02-27-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SWADC		
E. Full Name, Mailing Address and ZIP Code Rosa Mary Brown 334 North Main Street Buckner, AR 71827	Name of Employer Ark Dept. of Health	Date 02-27-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation WIC & Child Health Clerk		
F. Full Name, Mailing Address and ZIP Code Jim Martin Rt. 1 Box 93 Bradley, AR 71828	Name of Employer Lafayette County Sheriff	Date 02-27-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Criminal Investigator		
G. Full Name, Mailing Address and ZIP Code Midge Palmer 725 Maple Camden, AR 71701	Name of Employer Office Manager	Date 03-04-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AEP		
SUBTOTAL of Receipts This Page (optional) >	\$240.00	TOTAL This Period (last page this line number only) >	-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Jean Beavers 6410 Shirley Dr. Little Rock, AR 72204-1573	Name of Employer Information Requested	Date 03-04-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
B. Full Name, Mailing Address and ZIP Code Rev. George Smith 118 Holloway Camden, AR 71701	Name of Employer Greater St. Paul Church	Date 03-04-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Minister		
C. Full Name, Mailing Address and ZIP Code	Name of Employer n/a	Date 03-04-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	03-04-98	\$25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer n/a	Date 03-04-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	03-04-98	\$25.00
E. Full Name, Mailing Address and ZIP Code Loretta Thomas 240 Trail Ride Angleton, TX 77515	Name of Employer n/a	Date 03-18-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a		FUNDRAISED
F. Full Name, Mailing Address and ZIP Code McCaskill 3480 Hwy 7 Arkadelphia, AR 71923	Name of Employer Angleton	Date 03-05-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher		
G. Full Name, Mailing Address and ZIP Code Sharron A. Wiltz 5848 Stillwater Drive New Orleans, LA 70128	Name of Employer Information Requested	Date 03-05-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
SUBTOTAL of Receipts This Page (optional)	Name of Employer Ball	Date 03-06-98	Amount this pd. \$50.00
TOTAL This Period (last page this line number only)	Occupation Small Business Consultant		
	Year-to-Date >	\$50.00	\$445.00
	Year-to-Date >	\$50.00	-----

SUBTOTAL of Receipts This Page (optional)

\$445.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mrs. Velma Slaughter 2905 Adams Camden, AR 71701	Name of Employer Information Requested Occupation Retired	Date 03-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$50.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Willie Carter 447 Union Camden, AR 71701	Name of Employer Information Requested Occupation Retired	Date 03-09-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$5.00	
C. Full Name, Mailing Address and ZIP Code Mr. Donald Crary 523 North Pine Little Rock, AR 72205	Name of Employer Neww Futures for Youth Occupation Director	Date 03-09-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$100.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Mary Green 115 Ouachita 439 Camden, AR 71701	Name of Employer Information Requested Occupation Housewife	Date 03-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$50.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Josephine Walter P.O. Box 994 Hampton, AR 71744	Name of Employer Information Requested Occupation Info Requested	Date 03-09-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$5.00	
F. Full Name, Mailing Address and ZIP Code Mr. Michael McIntyre 475 Jenkins Camden, AR 71701	Name of Employer City of Camden Occupation Sanitation worker	Date 03-09-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$10.00	
G. Full Name, Mailing Address and ZIP Code Ms. Corena Cross P.O. Box 91 Harrell, AR 71745	Name of Employer SWADC Occupation Nurse's aide	Date 03-09-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >	\$20.00	

SUBTOTAL of Receipts This Page (optional) >

\$240.00

TOTAL This Period (last page this line number only) >

SCHEDULE A

ITEMIZED RECEIPTS

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Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mrs. Loreatha Wood Route 3 Box 98 Hampton, AR 71744	Name of Employer Information Requested	Date 03-09-98	Amount this pd. \$2.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$2.00	
B. Full Name, Mailing Address and ZIP Code Ms. Donna Rucks P.O. Box 229 Camden, AR 71701	Name of Employer Extension Office	Date 03-09-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Secretary	Year-to-Date > \$6.00	
C. Full Name, Mailing Address and ZIP Code Ms. Evelyn Ware P.O. Box 605 Hampton, AR 71744	Name of Employer Information Requested	Date 03-09-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$5.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Eunistine White P.O. Box 28 Harrell, AR 71745	Name of Employer Information Requested	Date 03-09-98	Amount this pd. \$6.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date > \$6.00	
E. Full Name, Mailing Address and ZIP Code Ms. Ocie Davis P.O. Box 994 Hampton, AR 71744	Name of Employer Information Requested	Date 03-09-98	Amount this pd. \$5.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$5.00	
F. Full Name, Mailing Address and ZIP Code Mr. Johnny Smith Route 3, Box 105-A Hampton, AR 71744	Name of Employer J.R. Smith Trucking	Date 03-09-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner & Operator	Year-to-Date > \$50.00	
G. Full Name, Mailing Address and ZIP Code Mr. Arthur Malcolm 1240 Moses Camden, AR 71701	Name of Employer Lockheed Martin	Date 03-09-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HR	Year-to-Date > \$20.00	
SUBTOTAL of Receipts This Page (optional) >		\$93.00	
TOTAL This Period (last page this line number only) >		-----	

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 16 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Bonnell Rice 2000 Magnolia Apt. 252 Little Rock, AR 72202	Name of Employer Information Requested 03-09-98	Date 03-09-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$25.00		
B. Full Name, Mailing Address and ZIP Code Mr. Santfield Momon Route 3, Box 11 Hampton, AR 71744	Name of Employer Information Requested 03-09-98	Date 03-09-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Year-to-Date > \$10.00		
C. Full Name, Mailing Address and ZIP Code Mr. Harold Jones 116 Day Street Camden, AR 71701	Name of Employer Fikes Truck Lines 03-09-98	Date 03-09-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Driver Year-to-Date > \$25.00		
D. Full Name, Mailing Address and ZIP Code Mr. Tilmon Ross 1503 Confederate Ave. Hope, AR 71801	Name of Employer Information Requested 03-11-98	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$10.00		
E. Full Name, Mailing Address and ZIP Code Mr. Ben Johnson 1329 Mt. Holly Road El Dorado, AR 71731	Name of Employer Histroy Instructor 03-11-98	Date 03-11-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation South Ark Community Coll Year-to-Date > \$50.00		
F. Full Name, Mailing Address and ZIP Code Mr. Jerry Walsh 1832 Pearce Street Magnolia, AR 71753	Name of Employer South Arkansas Youth Serv 03-11-98	Date 03-11-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director - Youth Agency Year-to-Date > \$50.00		
G. Full Name, Mailing Address and ZIP Code Mrs. Fairilla Smith 702 South Walnut Hope, AR 71801	Name of Employer Information Requested 03-11-98	Date 03-11-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested Year-to-Date > \$20.00		

SUBTOTAL of Receipts This Page (optional) > **\$190.00**TOTAL This Period (last page this line number only) > **-----**

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 17 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Ms. Catherine Stuart 447 CR 217 Hope, AR 71801	Name of Employer Hope Nursery & Garden Cen	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Manager	Year-to-Date > \$10.00	
B. Full Name, Mailing Address and ZIP Code Ms. Darlene Sinyard 1612 Ave D West Hope, AR 71801	Name of Employer Hempstead County	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Tax Assessor	Year-to-Date > \$10.00	
C. Full Name, Mailing Address and ZIP Code Ms. Margie Vickers 1310 Plum Hope, AR 71801	Name of Employer Hempstead County	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Treasurer	Year-to-Date > \$10.00	
D. Full Name, Mailing Address and ZIP Code Ms. Ann Price 374 Oakhaven Drive Hope, AR 71801	Name of Employer University of AR Communit	Date 03-11-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Instructor	Year-to-Date > \$25.00	
E. Full Name, Mailing Address and ZIP Code Ms. Charlene Clark 201 North California Hope, AR 71801	Name of Employer Information Requested	Date 03-11-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date > \$25.00	
F. Full Name, Mailing Address and ZIP Code Ms. Carolyn Neel 115 Ward Lane Hope, AR 71801	Name of Employer Hempstead County	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Circuit Clerk	Year-to-Date > \$10.00	
G. Full Name, Mailing Address and ZIP Code Ms. Betty Gilbert 1377 HWY 73 W Washington, AR 71682	Name of Employer Hempstead County Treasure	Date 03-11-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Deputy	Year-to-Date > \$25.00	
SUBTOTAL of Receipts This Page (optional) >	\$115.00		
TOTAL This Period (last page this line number only) >	-----		

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 18 OF 28

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Ms. Velora Haltom P.O. Box 454 Hope, AR 71802-0454	Name of Employer Hempstead County	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Clerk	Year-to-Date > \$10.00	
B. Full Name, Mailing Address and ZIP Code Mr. Wallace Martin 1012 W 13th Street Hope, AR 71801	Name of Employer Hempstead County	Date 03-11-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Judge	Year-to-Date > \$10.00	
C. Full Name, Mailing Address and ZIP Code Ms. Diane Watt 212 Ashley 440 Crossett, AR 71635	Name of Employer Mary Kay	Date 03-11-98	Amount this pd. \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Director	Year-to-Date > \$150.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Doris Brown 306 S. Hamilton Hope, AR 71801	Name of Employer Avon	Date 03-13-98	Amount this pd. \$10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self employed	Year-to-Date > \$10.00	
E. Full Name, Mailing Address and ZIP Code Ms. Joanna DeJanovich 2 Atadura Lane Hot Springs Village, AR 71909	Name of Employer Arkansas Nurses Assoc.	Date 03-13-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chief Staff Officer	Year-to-Date > \$50.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Betty Deere 409 James Place Heber Springs, AR 72543	Name of Employer Self-Deere Psychotherapy	Date 03-13-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LCSW	Year-to-Date > \$50.00	
G. Full Name, Mailing Address and ZIP Code Ms. Lia Lent 2001 Gaines Street Little Rock, AR 72206	Name of Employer Information Requested	Date 03-13-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$50.00	

SUBTOTAL of Receipts This Page (optional) >

\$330.00

TOTAL This Period (last page this line number only) >

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 19 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Ms. Sandy Sanders 3321 Cypress North Little Rock, AR 72116	Name of Employer Information Requested	Date 03-13-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Student		
B. Full Name, Mailing Address and ZIP Code Mrs. Phyllis Watkins Warner Street Camden, Ar 71701	Name of Employer Camden Fairview School	Date 03-13-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Counselor		
C. Full Name, Mailing Address and ZIP Code Mrs. Anna Hicks No. 2 Glendale Court Arkadelphia, AR 71923	Name of Employer Information Requested	Date 03-13-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
D. Full Name, Mailing Address and ZIP Code Mr. Horace Bellard 2509 20th Street Lake Charles, LA 70601	Name of Employer Entergy Gulf States	Date 03-16-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Supervisor		
E. Full Name, Mailing Address and ZIP Code Dr. Gail Jones 9800 Life Drive, #200 Little Rock, AR 72205	Name of Employer Ar Association	Date 03-16-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Mrs. Vyleria Dunn 832 Chestnut Camden, AR 71701	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
G. Full Name, Mailing Address and ZIP Code Mrs. Mildred Turner 747 Skyline Drive Camden, AR 71701	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
SUBTOTAL of Receipts This Page (optional) >			\$345.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 20 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(II)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mr. L.C. Smith 531 Maple Camden, AR 71701	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
B. Full Name, Mailing Address and ZIP Code Mrs. Wanda Raper 208 Daffodi - B1 Hot Springs, AR 71913	Name of Employer Small Group Work Therapy	Date 03-16-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO		
C. Full Name, Mailing Address and ZIP Code Mr. Charles McRae 3235 Hwy 78 South Camden, AR 71701	Name of Employer Self employed	Date 03-16-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Truck Driver		
D. Full Name, Mailing Address and ZIP Code Mr. John Ardoin 1017 Beech Magnolia, AR 71753	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$15.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
E. Full Name, Mailing Address and ZIP Code Tracy Steele 516 W 55th Terrace Drive North Little Rock, AR 72118	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
F. Full Name, Mailing Address and ZIP Code Mr. John McLewellen 1922 Wolfe Street Little Rock, AR 72202	Name of Employer Information Requested	Date 03-16-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
G. Full Name, Mailing Address and ZIP Code Mrs. Frances Block 204 North Monroe Little Rock, AR 72205	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
SUBTOTAL of Receipts This Page (optional) >			\$285.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 21 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mrs. Janice Chaparro 10 Summerhill Court Little Rock, AR 72211	Name of Employer Philander Smith College	Date 03-18-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Work Professor	Year-to-Date > \$100.00	
B. Full Name, Mailing Address and ZIP Code Mrs. Lila Riggs 108 Indian Trail Little Rock, AR 72207	Name of Employer Information Requested	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Campaign Manager	Year-to-Date > \$25.00	Amount this pd. \$25.00 FUNDRAISED
C. Full Name, Mailing Address and ZIP Code Mrs. Linda Van Blaricom 3218 Summit Court Little Rock, AR 72207	Name of Employer Bridgeway Hospital	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychological Examiner	Year-to-Date > \$50.00	Amount this pd. \$50.00 FUNDRAISED
D. Full Name, Mailing Address and ZIP Code Mr. Stephan Niswanger 7227 Apache Road Little Rock, AR 72205	Name of Employer Williams & Anderson	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Year-to-Date > \$20.00	Amount this pd. \$20.00 FUNDRAISED
E. Full Name, Mailing Address and ZIP Code Ms. Louanne Lawson 5114 Cantrell Little Rock, AR 72207	Name of Employer UAMS	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	Amount this pd. \$25.00 FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Mr. Michael Vogler 5114 Cantrell Little Rock, AR 72207	Name of Employer New Futures for Youth	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Work	Year-to-Date > \$75.00	Amount this pd. \$75.00 FUNDRAISED
G. Full Name, Mailing Address and ZIP Code Ms. Marie Miller 607 LaSalle Drive Little Rock, AR 72211	Name of Employer Gill Law Firm	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Year-to-Date > \$25.00	Amount this pd. \$25.00 FUNDRAISED
SUBTOTAL of Receipts This Page (optional) >			
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 22 OF 28

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Ms. Miriam Raney 26 Valley Forge Drive Little Rock, AR 72212	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$25.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Year-to-Date >	\$25.00	
B. Full Name, Mailing Address and ZIP Code Mrs. R. L. Whitfield 3023 South Battery Little Rock, AR 72206-1910	Name of Employer Ark Advocate	Date 03-18-98	Amount this pd. \$25.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Parent Advocate		
	Year-to-Date >	\$25.00	
C. Full Name, Mailing Address and ZIP Code Ms. Sheila Bronfman 5213 North Grandview Little Rock, AR 72207	Name of Employer Southern Strategy Group	Date 03-18-98	Amount this pd. \$60.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant		
	Year-to-Date >	\$60.00	
D. Full Name, Mailing Address and ZIP Code Ms. Cindy Patterson 711 North Ash #5 Little Rock, AR 72205	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
E. Full Name, Mailing Address and ZIP Code Mr. Ronald Sheffield 12119 Cherry Laurel Drive Little Rock, AR 72211-4187	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
F. Full Name, Mailing Address and ZIP Code Mr. Hugh Earnest 212 Kingsrow Little Rock, AR 72207	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
G. Full Name, Mailing Address and ZIP Code Ms. Dorothy Westerlund 3913 Lakeshore Drive North Little Rock, AR 72116	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
SUBTOTAL of Receipts This Page (optional) >			\$310.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mr. John Green 44 Lakeside Drive Little Rock, AR 72204	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$50.00	
B. Full Name, Mailing Address and ZIP Code Mr. Richard Lawrence 28 Pine Manor Little Rock, AR 72207	Name of Employer Information Requested	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	Amount this pd. \$100.00 FUNDRAISED
C. Full Name, Mailing Address and ZIP Code Mr. Edward Hill 301 North Shackleford Suite C201 Little Rock, AR 72211	Name of Employer Information Requested	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
D. Full Name, Mailing Address and ZIP Code Arkansas Senior Democrats 1300 West Capitol Little Rock, AR 72201	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$100.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
E. Full Name, Mailing Address and ZIP Code Mr. George Buck 5113 Kavanaugh Blvd. Little Rock, AR 72207	Name of Employer Information Requested	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	Amount this pd. \$25.00 FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Ms. Jane Gray-Todd 8217 Easy Street Sherwood, AR 72120	Name of Employer Information Requested	Date 03-18-98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
G. Full Name, Mailing Address and ZIP Code Ms. Sarah Lodge P.O. Box 7627 Little Rock, AR 72217	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$25.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
SUBTOTAL of Receipts This Page (optional) >			
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

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Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(II)

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NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mr. Kevin Dedner 3314 Holt Little Rock, AR 72204	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$20.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$20.00	
B. Full Name, Mailing Address and ZIP Code Ms. Linda Price 4 Ridgewell Court North Little Rock, AR 72120	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
C. Full Name, Mailing Address and ZIP Code Paul Kelly 7 Leslie Circle Little Rock, AR 72205-2529	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$100.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Fran Mitchell 2711 Olive Street Texarkana, AR 75503	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
E. Full Name, Mailing Address and ZIP Code Mr. Robert Leflar 1495 Finger Road Fayetteville, AR 72701	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Year-to-Date >	\$50.00	
F. Full Name, Mailing Address and ZIP Code Mrs. Sanford Tollette 2715 Chester Little Rock, AR 72206	Name of Employer Information Requested	Date 03-18-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Year-to-Date >	\$25.00	
G. Full Name, Mailing Address and ZIP Code James Woods 926 Memory Lane Camden, AR 71701	Name of Employer Information Requested	Date 03-22-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self-employed		
	Year-to-Date >	\$50.00	
SUBTOTAL of Receipts This Page (optional) >			\$345.00
TOTAL This Period (last page this line number only) >			-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 25 OF 26

Unitemized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Trish Smith 104 Circle Drive Magnolia, AR 71753	Name of Employer Information Requested	Date 03-22-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
B. Full Name, Mailing Address and ZIP Code Mr. Larence Johnson 5000 Candlewick Lane North Little Rock, AR 72116	Name of Employer DHS	Date 03-23-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Acting Director	Year-to-Date > \$100.00	
C. Full Name, Mailing Address and ZIP Code Rev. George Johnson P.O. Box 663 Lewisville, AR 71845	Name of Employer Information Requested	Date 03-23-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date > \$25.00	
D. Full Name, Mailing Address and ZIP Code Peggy Stevenson 420 Cedar Street Hot Springs, AR 71901	Name of Employer Information Requested	Date 03-28-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date > \$20.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Odessa Scott 3140 Missouri Camden, AR 71701	Name of Employer Information Requested	Date 03-26-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Year-to-Date > \$25.00	
F. Full Name, Mailing Address and ZIP Code J.C. Jeffries 1495 Collins Drive Pine Bluff, AR 71601	Name of Employer UAPB	Date 03-27-98	Amount this pd. \$35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Counselor	Year-to-Date > \$35.00	
G. Full Name, Mailing Address and ZIP Code Mrs. Sharon Allen 2111 Hinson Road #7 Little Rock, AR 72212	Name of Employer Ark Blue Cross Shield	Date 03-31-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
SUBTOTAL of Receipts This Page (optional) >	\$330.00	TOTAL This Period (last page this line number only) >	-----

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 26 OF 26

Unitized Contributions from Individuals/Persons

FOR LINE NUMBER
11(a)(ii)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Mrs. Julie Kardas 109 Circle Drive Magnolia, AR 71753	Name of Employer Information Requested	Date 03-28-98	Amount this pd. \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$100.00	
B. Full Name, Mailing Address and ZIP Code Mr. Frank Adcock 490 Cash Road Camden, AR 71701	Name of Employer Camden Fairview Middle Sc	Date 03-28-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Year-to-Date > \$50.00	
C. Full Name, Mailing Address and ZIP Code Ms. Julia Westfall 8 Broadmoor Drive Little Rock, AR 72204-4819	Name of Employer Retired	Date 03-29-98	Amount this pd. \$35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Worker	Year-to-Date > \$35.00	
D. Full Name, Mailing Address and ZIP Code Mrs. Brenda Scisson 14123 Longtree Drive Little Rock, AR 72212	Name of Employer Cranford Johnson Robinson	Date 03-30-98	Amount this pd. \$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$20.00	
E. Full Name, Mailing Address and ZIP Code Ms. Irene Samuel 8 Pinnacle Point Little Rock, AR 72205	Name of Employer Information Requested	Date 03-28-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	FUNDRAISED
F. Full Name, Mailing Address and ZIP Code Ms. Juanita Charles 921 Union Avenue El Dorado, AR 71730-4445	Name of Employer Information Requested	Date 03-31-98	Amount this pd. \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$25.00	
G. Full Name, Mailing Address and ZIP Code Dr. Bernita Patterson 506 Greenbriar Drive Pine Bluff, AR 71603-7142	Name of Employer Information Requested	Date 03-31-98	Amount this pd. \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested	Year-to-Date > \$50.00	
SUBTOTAL of Receipts This Page (optional) >	\$305.00		
TOTAL This Period (last page this line number only) >	\$10,113.00		

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from the Candidate

PAGE 1	OF 1
FOR LINE NUMBER 11(d)	

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Mailing Address and ZIP Code Judy Smith P.O. Box 213 Camden, AR 71701	Name of Employer PAC	Date 02-25-98	Amount this pd. \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation social worker	Year-to-Date > \$150.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date	Amount this pd.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date >		
SUBTOTAL of Receipts This Page (optional) >	\$150.00		
TOTAL This Period (last page this line number only) >	\$150.00		

SCHEDULE A

ITEMIZED RECEIPTS

PAGE 1 OF 1

Offsets to Operating Expenditures

FOR LINE NUMBER
14

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00328193

A. Full Name, Mailing Address and ZIP Code Little Rock Club 400 West Capitol, Ste 2333 Little Rock, AR 72227	Name of Employer Occupation	Date 03-04-98	Amount this pd. \$273.01 FUNDRAISED
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Year-to-Date > \$273.01		
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date Year-to-Date >	Amount this pd.
SUBTOTAL of Receipts This Page (optional) >			\$273.01
TOTAL This Period (last page this line number only) >			\$273.01

SCHEDULE A **ITEMIZED RECEIPTS**
Other Receipts (Dividends, Interest, etc.)

PAGE 1	OF 1
FOR LINE NUMBER	
15	

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)
Judy Smith for Congress **C00329193**

A. Full Name, Mailing Address and ZIP Code Sylvester Smith 921 Beale Camden, AR 71701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date 03-31-98	Amount this pd. \$800.00 IN-KIND DISBURSEMENT MADE
	Occupation Info Requested		
	Year-to-Date >		
B. Full Name, Mailing Address and ZIP Code Judy Smith P.O. Box 213 Camden, AR 71701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC	Date 03-31-98	Amount this pd. \$377.11 IN-KIND DISBURSEMENT MADE
	Occupation social worker		
	Year-to-Date >		
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date	Amount this pd.
	Occupation		
	Year-to-Date >		
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date	Amount this pd.
	Occupation		
	Year-to-Date >		
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date	Amount this pd.
	Occupation		
	Year-to-Date >		
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date	Amount this pd.
	Occupation		
	Year-to-Date >		
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date	Amount this pd.
	Occupation		
	Year-to-Date >		

SUBTOTAL of Receipts This Page (optional) > **\$977.11**

TOTAL This Period (last page this line number only) > **\$977.11**

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Operating Expenditures

PAGE 1	OF 5
FOR LINE NUMBER 17	

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)
Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code Brown Printing Co. 8508 Asher Ave Little Rock, AR 72204	Purpose of Disbursement letterheads	01-06-98	\$222.86
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
B. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement printing	01-06-98 02-27-98	\$203.76 \$357.64
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code Southwestern Bell Telephone 10810 Executive Drive Little Rock, AR 72211	Purpose of Disbursement phone service	01-05-98	\$178.43
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement phone service	01-12-98	\$61.09
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement Telephone Bill	02-10-98	\$174.91
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement Telephone Installation	03-04-98	\$168.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement Telephone service	03-04-98	\$140.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code Dan Cook's P. O. Box C Camden, AR 71711	Purpose of Disbursement Office Supplies	01-12-98	\$66.79
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement printing	02-03-98	\$303.52
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) > **\$1,877.00**

TOTAL This Period (last page this line number only) > **-----**

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Operating Expenditures

PAGE	2	OF	5
FOR LINE NUMBER			
17			

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)
Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	phone service		
MCI P.O. Box 4644 Iowa City, IA 52244	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	01-12-98	\$112.80
	<input type="checkbox"/> Other:		
B. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	long distance service		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	02-27-98	\$380.65
	<input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	payroll		
David C. Nayles P.O. Box 213 Camden, AR 71711	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	01-14-98	\$400.00
	<input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	payroll		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	01-23-98	\$250.00
	<input type="checkbox"/> Other:	02-27-98	\$100.00
		02-20-98	\$250.00
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	payroll		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	02-13-98	\$250.00
	<input type="checkbox"/> Other:	02-08-98	\$250.00
		01-30-98	\$250.00
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	postage		
U. S. Postmaster 351 Washington SW Camden, AR 71701	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	01-16-98	\$65.70
	<input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	postage		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	02-11-98	\$43.88
	<input type="checkbox"/> Other:	02-08-98	\$34.62
		02-04-98	\$166.40
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	postage		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	01-30-98	\$34.19
	<input type="checkbox"/> Other:	03-02-98	\$32.00
		03-06-98	\$32.00
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	postage		
(same as above)	For: <input type="checkbox"/> Primary <input type="checkbox"/> General	03-17-98	\$32.00
	<input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) > \$2,684.24

TOTAL This Period (last page this line number only) > -----

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Operating Expenditures

PAGE 3	OF 6
FOR LINE NUMBER 17	

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
U. S. Postmaster 351 Washington SW Camden, AR 71701	Rental of post office box	03-04-98	\$33.00
B. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
ARKLA Gas 508 Griffith Camden, AR 71730	utilities	01-15-98	\$87.58
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	utilities	02-10-98	\$91.86
		03-06-98	\$67.61
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Bridget Foreman 4279 Highway 24 Chidester, AR 71726	payroll	02-13-98	\$125.00
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	payroll	02-20-98	\$125.00
		02-27-98	\$125.00
		03-05-98	\$125.00
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	payroll	03-13-98	\$125.00
		03-20-98	\$125.00
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
Hannah Vogler 28 Pine Manor Drive Little Rock, AR 72207	payroll	02-27-98	\$250.00
		02-20-98	\$250.00
		02-13-98	\$250.00
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	payroll	03-06-98	\$250.00
		03-13-98	\$250.00
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
(same as above)	copies	03-13-98	\$36.75

SUBTOTAL of Disbursements This Page (optional) > **\$2,316.80**

TOTAL This Period (last page this line number only) > **-----**

SCHEDULE B

ITEMIZED DISBURSEMENTS

PAGE 4 OF 6

Operating Expenditures

FOR LINE NUMBER
17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code Hannah Vogler 28 Pine Manor Drive Little Rock, AR 72207	Purpose of Disbursement payroll	Date 03-17-98	Amount \$250.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
B. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement Postage	Date 03-17-98	Amount \$582.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code Little Rock Club 400 West Capitol, Ste 2333 Little Rock, AR 72227	Purpose of Disbursement Club Rental	Date 02-04-98	Amount \$2,050.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code Democrat Party Of Arkansas 1 Little Rock, AR 72020	Purpose of Disbursement filing fee	Date 03-17-98	Amount \$5,000.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code Laguens & Hamburger Seder 1 Washington, DC 10000	Purpose of Disbursement consultant fee	Date 03-17-98	Amount \$640.79
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code Sylvester Smith 921 Beale Camden, AR 71701	Purpose of Disbursement rent	Date 03-31-98	Amount \$600.00 In-Kind: building rental
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code Judy Smith P.O. Box 213 Camden, AR 71701	Purpose of Disbursement meals & travel	Date 03-31-98	Amount \$377.11 In-Kind: travel & meal expenses
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code Democrat Congressional Campaign 430 South Capitol Street Washington, DC 20003	Purpose of Disbursement polling committee	Date 03-24-98	Amount \$2,000.00 IN-KIND RECEIVED
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code (same as above)	Purpose of Disbursement polling	Date 02-27-98	Amount \$2,000.00 IN-KIND RECEIVED
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) > \$13,499.90

TOTAL This Period (last page this line number only) > -----

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Operating Expenditures

PAGE 6	OF 6
FOR LINE NUMBER 17	

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
UNITEMIZED DISBURSEMENTS	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		\$853.29
B. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) > **\$853.29**

TOTAL This Period (last page this line number only) > **\$21,231.23**

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Refunds to Individuals/Persons

PAGE 1	OF 1
FOR LINE NUMBER 20(a)	

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NAME OF COMMITTEE (in Full)
Judy Smith for Congress

C00329193

A. Full Name, Address and ZIP Code David C. Nayles P.O. Box 213 Camden, AR 71711	Purpose of Disbursement postage	02-08-98	Amount \$8.40
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
B. Full Name, Address and ZIP Code Dana Lawrence 28 Pine Manor Drive Little Rock, AR 72207	Purpose of Disbursement Airfare	02-27-98	Amount \$282.00
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Address and ZIP Code	Purpose of Disbursement	Date	Amount
	For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) > **\$288.40**

TOTAL This Period (last page this line number only) > **\$288.40**

SCHEDULE D

DEBTS AND OBLIGATIONS
Owed BY the Committee (Excluding Loans)PAGE 1 OF 1
FOR LINE NUMBER
10

NAME OF COMMITTEE (in Full) Judy Smith for Congress/C000328193	Beginning Balance	Amount Incurred	Period Payments	Closing Balance
A. Full Name, Address and ZIP Code Horton Brothers P.O. Box 5668 North Little Rock, AR 72119	-----	\$820.71	none	\$820.71
Nature of Debt (Purpose): Printing				
B. Full Name, Address and ZIP Code MCI P.O. Box 4644 Iowa City, IA 52244	-----	\$161.25	none	\$161.25
Nature of Debt (Purpose): telephone - long distance service				
C. Full Name, Address and ZIP Code				
Nature of Debt (Purpose):				
D. Full Name, Address and ZIP Code				
Nature of Debt (Purpose):				
E. Full Name, Address and ZIP Code				
Nature of Debt (Purpose):				
F. Full Name, Address and ZIP Code				
Nature of Debt (Purpose):				
1) SUBTOTAL This Period This Page (optional)	>			\$981.96
2) TOTAL This Period (last page this line only)	>			\$981.96
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>			
4) ADD 2) and 3) and carry forward to Summary Page (last page only)	>			\$981.96

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4-15-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>[Signature]</i> PREPARER	4-24-98 DATE PREPARED