

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Scott Wallace for US Congress

ADDRESS (number and street)

PO Box 242600

(Check if address is changed)

Little Rock

AR

72223

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

mpruggiero@att.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.scottwallace2010.com

2. DATE

04 / 26 / 2010

3. FEC IDENTIFICATION NUMBER

C C00468934

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Maureen Ruggiero

Signature of Treasurer

Electronically Filed by Maureen Ruggiero

Date

04 / 26 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

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

FEC FORM 1 (Revised 02/2009)

Write or Type Committee Name

Scott Wallace for US Congress

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

Maureen Ruggiero

Mailing Address

8001 Jamsine Cove

Bauxite

AR

72011

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Maureen Ruggiero

Mailing Address

8001 Jamsine Cove

Bauxite

AR

72011

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Full Name of Designated Agent

Ted Thomas

Mailing Address

609 Locust Ave

Conway

AR

72034

Title or Position

CITY

STATE

ZIP CODE

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Arvest Bank NA

Mailing Address

500 Broadway Place

Little Rock

AR

72201

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE