

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Aug 11 11 05 AM '97

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Judy Smith for Congress	2. DATE 8/5/97
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 637 Scales (P.O. Box 213 Camden, AR 71711)	3. FEC Identification Number to be assigned
(c) City, State and ZIP Code Camden, Arkansas 71701	4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|---------------------------------|---|-----------------------------|-------------------------|
| Name of Candidate
Judy Smith | Candidate Party Affiliation
Democrat | Office Sought
U.S. House | State/District
AR/04 |
|---------------------------------|---|-----------------------------|-------------------------|
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

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	Mailing Address	Title or Position
Bridget Foreman	4279 Hwy 24 Chidester, AR 71726	Asst. Treasurer

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	Mailing Address	Title or Position
Alvernon McHenry	1241 Cuba Circle, Camden AR 71701	Treasurer
Bridget Foreman	same as above	Asst. Treasurer

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.	Mailing Address and ZIP Code
Boatmen's National Bank of South Ark.	116 Jefferson, S.W., Camden, AR 71701
First Bank of So. Ark.	1120 Washington Camden, AR 71701

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 Alvernon McHenry	SIGNATURE OF TREASURER 	DATE 8/5/97
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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.


For further information contact:
 Federal Election Commission
 Toll-free 800-424-9530
 Local 202-219-3420

FE6AN053

FEC FORM 1
(revised 4/87)

**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 8-6-97
<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
 PREPARER	8-11-97 DATE PREPARED