NONE 05 NO 05 05 00040004

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAILCENTER

2023 MAY 25 AM II: 53

			Offic	ce Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, over the lines.	type 12FE4M5	
STONEWALL DEMOCRAT	TIÇ ÇAUCUŞ OF ARK	4N\$A\$ 1		
ADDRESS (number and street)	PO BOX 55557			
(Check if address is changed)				
	LITTLE ROCK 1 1	1111111	AR 722	1,5
COMMITTEE'S E-MAIL ADDRE	ss			
(Check if address is changed)	SCARLETTBELLES	7@GMAJL.CQM; ; ;		
	Optional Second E-Mail RFRAZIER@EGRC	, , ,		
COMMITTEE'S WEB PAGE ADD	ې پېښې د د د مېد(URL) مېرمونه د د د مېد(URL	the Build into the fire both of	The second contract of	North State of Leading
(Check if address is changed)	WWW.STONEWALI	LARKANSAS.CQMI I	. <u></u>	
	. L			
2. DATE 05 16	2023			
3. FEC IDENTIFICATION NU	JMBER ▶ C	00418186		
4. IS THIS STATEMENT	NEW (N) OR	AMENDE	D (A)	
I certify that I have examined th	nis Statement and to the b	pest of my knowledge and	belief it is true, correct and c	complete.
Type or Print Name of Treasurer Signature of Treasurer	REBECCA FRAZ	,	Date! 05	16 ² 2023
NOTE: Submission of false, errone		tion may subject the person		enalties of 52 U.S.C. §30109.
Office Use Only	: .	For further info Federal Election Toll Free 800-42- Local 202-694-11	1-9530	FEC FORM 1 . (Revised 03/2022)

FEC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information belo	ow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	omplete the candidate
Name of Candidate	
Candidate Office House Senate President	State dent District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Samu Donard
Name of Candidate	
(d) II This committee is a II II '	Democratic, Republican, etc.) Party
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) It	s connected organization is a:
Corporation Corporation Corporation w/o Capital Stock Trade Association	Labor Organization Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) . This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts	(Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative	
Joint Fundraising Representative: (i) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal cane	·
This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1. L	
	1

FEC Form 1 (F	Revised 03/2022)	Page 3
Write or Type Committee	ee Name	
	OCRATIC CAUCUS OF ARKANSAS	
6. Name of Any Conn	nected Organization, Affiliated Committee, Joint Fundraising Represent	lative, or Leadership PAC Sponsor
Mailing Address		
	CITY ▲ STAT	TE ▲ ZIP CODE ▲
Relationship:	onnected Organization Affiliated Organization Joint Fundraising Rep	resentative Leadership PAC Sponso
 Custodian of Recor books and records. 	rds: Identify by name, address (phone number optional) and position of the	person in possession of committee
Full Name	REBECCA FRAZIER	
Mailing Address	PO BQX 55557	
	LITTILE ROCK A	R 72215 -
	CITY ▲ STAT	TE ▲ ZIP CODE ▲
Title or Position ▼		
ŢŖĘĄŞUŖĘŖ _Į	Telephone number	501 - 749 - 3676
	name and address (phone number optional) of the treasurer of the com nt (e.g., assistant treasurer).	mittee; and the name and address of
Full Name of Treasurer	REBEGCA FRAZIER	
Mailing Address	PO BOX \$5557	
	LITTILE ROCKIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	R 72215 -
	CITY A STAT	TE ▲ ZIP CODE ▲
Title or Position ▼		
TREASURER L	Telephone number	501 - 749 - 3676

CITY A

STATE ▲

ZIP CODE ▲

Mailing Address

FEC	Form	15	(Revised	03/2022

Optional Supplemental Information

Page	of	

FE	C Form 1S (Revised 03/2	022) for Lines 5(i) or (j), 6, 8 and/or 9	Page of
5(i) or (j). Joint Fundraisin	Participant:	
	1	FEC ID number	
	2	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	
6. N	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor
			1 1 1 1 1 1 1 1 1 1
	Mailing Address		
	Relationship:	CITY ▲ STATE ▲	ZIP CODE ▲
	P=0	Organization Affiliated Committee Joint Fundraising Representative	P-1
-			
8. C	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Mailing Address		<u> </u>
			<u> </u>
			<u> </u>
	TITLE OR POSITION	▼ CITY ▲ STATE ▲	ZIP CODE ▲
		Telephone Number	ــــا-لـــا-ل
s	Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ies: List all banks or other depositories in which the committee deposits fundants funds.	nds, holds accounts, rents
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲

Vederal Electión Committee

1050 Just Sheet, N.E.

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
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Overnight Delivery Service (Specify):	ipping Date Date of Receipt Next Business Day Delivery			
Received via FAX	Date of Receipt			
Received via Email	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
PREPARER MP	5/25/23 DATE PREPARED			
(4/2023)	DATE FINE ANED			