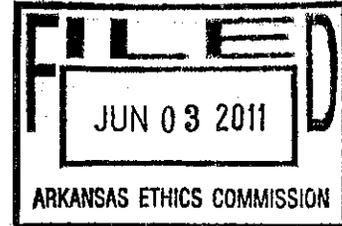


LEGISLATIVE QUESTION COMMITTEE (LQC) STATEMENT OF ORGANIZATION

To be filed with:
Arkansas Ethics Commission
Post Office Box 1917
Little Rock, AR 72203
Phone (501) 324-9600
Fax (501) 324-9606

(Arkansas Ethics Commission File Stamp)



Check if this is an amendment to a previously filed statement of organization

Section One: LQC Name

Name of LQC (in full): Washington County Tea Party

Section Two: LQC Address & Phone Number

If LQC has no office address, use the address of the LQC officer authorized to receive notices on behalf of the LQC.

Address: P.O. Box 4710

City: Fayetteville, State AR Zip 72702 Telephone Number 888-311-4348

Section Three: LQC Officers and Directors

Provide the name, title, address, and telephone number of the treasurer and other principal officers and directors of the LQC.

Name: Randy Alexander Title: Chairman

Address: 759 Buckhead Street City: Springdale State: AR Zip: 72764

Telephone Number: (479) 283-5531

Name: Jeff Oland Title: Vice Chairman

Address: P.O. Box 407 City: Farmington State: AR Zip: 72730

Telephone Number: 479 871-9551

Name: Mary Gardner Title: Treasurer

Address: _____ City: _____ State: AR Zip: _____

Telephone Number: (479) 903-3006

Name: Mona Roache Title: Secretary

Address: _____ City: _____ State: AR Zip: _____

Telephone Number: 927-342-2568

