

LEGISLATIVE QUESTION COMMITTEE FINANCIAL REPORT

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)

FILED
in
JUL 03 2012

ARKANSAS ETHICS
COMMISSION
BY _____

Check if this report is an amendment to a previously filed report

1. NAME OF COMMITTEE (IN FULL) Bentonville Kids Come First	2. TYPE OF REPORT <input checked="" type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election)
ADDRESS 1129 NW "J" Street	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE Bentonville, AR 72712	
TELEPHONE NUMBER 479-659-1902	

This report covers period: (6 -20- 2012) through (6- 30- 2012)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$7,909.47	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$0.00	\$32,955.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$3,412.20	\$33,851.84
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$4,497.27	

7. () **NO ACTIVITY** Check if you have not received or made any contributions during this reporting period. If you have no activity, file the first page of this report only.

I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

Elisha N Leak
Signature of Legislative Question Committee Officer

State of Arkansas
County of Benton } ss

Subscribed and sworn before me this 3rd day of July, 2012.

(Legible Notary Seal)

Amber D Nunnelee
Signature of Notary Public

My Commission Expires 3-9-2019

OFFICIAL SEAL
AMBER D NUNNELEE
NOTARY PUBLIC, ARKANSAS
BENTON COUNTY
COMMISSION # 12370144
COMMISSION EXP. 03/9/2019

10. ITEMIZED MONETARY CONTRIBUTIONS RECEIVED BY COMMITTEE OF \$50 OR MORE

Please Type or Print
Use Additional Copies of this Page if Necessary

Date of Receipt	Name of Contributor	Street Address of Contributor	Amount of Contribution	Cumulative Total from this Contributor
11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE				0.00
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS				
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)				\$0.00

