

BALLOT QUESTION FINANCIAL REPORT OF INDIVIDUAL, PUBLIC SERVANT OR GOVERNMENTAL BODY

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

OCT 16 2012

ARKANSAS ETHICS
COMMISSION

BY _____

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

1. NAME OF INDIVIDUAL, PUBLIC SERVANT, OR GOVERNMENTAL BODY FILING REPORT <p style="font-size: 1.2em; margin: 0;">JOHN F MONTGOMERY</p>	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 <p style="font-size: 1.2em; margin: 0;">1706 ASHBRIAR DRIVE</p>	CITY, STATE AND ZIP CODE <p style="font-size: 1.2em; margin: 0;">MOUNTAIN HOME, AR 72653</p>
TELEPHONE NUMBER <p style="font-size: 1.2em; margin: 0;">870-424-4496</p>	

This report covers period: (09 - 01 - 12) through (09 - 30 - 12)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	- 0 -	1595.67

4. **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.

 Signature of Individual, Public Servant,
 or Agent of Governmental Body

State of Arkansas

County of Baxter } ss

Subscribed and sworn before me this 15th day of October, 2012.

(Legible Notary Seal)

 Signature of Notary Public

My Commission Expires 4-21-2015



