BALLOT 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
APR 02 2014
ARKANSAS ETHICS COMMISSION
BY_____

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

1. NAME OF COMMITTEE (IN FULL)
Vote for Growth in Columbia County

ADDRESS
PO Box 672

CITY, STATE AND ZIP CODE
Magnolia, AR 71754

TELEPHONE NUMBER
870-234-7661

2. TYPE OF REPORT
☒ Monthly Report (due 15 days after end of month)
☐ Preelection Report (due 7 days before election)*
☐ Final Report (due 30 days after election)

*NOTE: Preelection report must be *received* by the Ethics Commission on or before due date.

This report covers period: (3 - 1 - 14) through (3 - 31 - 14)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	38,185.36	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	6,900.00	51,055.95
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	2,500.00	8,470.59
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	42,585.36	

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.

Signature of Ballot Question Committee Officer

State of Arkansas
County of Columbia } ss

Subscribed and sworn before me this 2nd day of April, 2014.

Laura L. McCrary
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires_____

LAURA L. MCCRARY
Columbia County
My Commission Expires
October 1, 2014

Revised 12/2013

8. LOAN INFORMATION

Please Type or Print
Do Not List Loans Previously Reported

Date	Name and Address of Lender	Amount
	9. TOTAL LOANS THIS REPORT	

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

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

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
3-5-14	LUDWIG INC	502 W MAIN WALDO, AR 71770	FOAM PRODUCTS	100.00	300.00
3-5-14	VILLAGE ONE SHOP	4961 HWY 82 E MAGNOLIA, AR 71753	CONVENIENCE STORE	100.00	100.00
3-5-14	BILLY VICKERS	1080 COL RD 405 MAGNOLIA, AR 71753	PERRITT & VICKERS MANAGER	300.00	300.00
3-5-14	ELIZABETH EPLEY	423 JEFFERSON MAGNOLIA, AR 71753	UNEMPLOYED	500.00	500.00
3-5-14	ROBERT McDONALD	2212 COL 87 MAGNOLIA, AR 71753	SOUTHERN TITLE - OWNER	200.00	200.00
3-5-14	MARGARET WEST	110 COL RD 432 S MAGNOLIA, AR 71753	MAGNOLIA HOSPITAL - MANAGER	200.00	200.00
3-5-14	TODD BEAMS	2610 BRIARWOOD MAGNOLIA, AR 71753	IAIX DO LUMBER MANAGER	200.00	200.00
3-5-14	KATHERINE DAVIS	761 COL 47 MAGNOLIA, AR 71753	KIDS FIRST COORDINATOR	5,300.00	5,300.00

ITEMIZED MONETARY CONTRIBUTIONS OF $50 OR MORE RECEIVED BY COMMITTEE

Please Type or Print

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
	11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF $50 OR MORE				6900.00
	12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS				
	13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT **(includes totals from lines 9, 11, and 12)**				6900.00

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE

(Does not include volunteer services by individuals)

Date of Receipt	Name of Contributor	Street Address of Contributor	Description and Value of Nonmoney Item	Cumulative Total from this Contributor
15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT				

IMPORTANT

In addition to monetary contributions, committees should report the receipt of any nonmoney ("in-kind") contributions. A committee receives an in-kind contribution whenever a person provides the committee with an item or service without charge or for a charge that is less than the fair market value of the item or service in question.

16. ITEMIZED EXPENDITURES OF $100 OR MORE MADE BY COMMITTEE OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC RELATIONS FIRM, OR POLITICAL CONSULTANT

Please Type or Print

Use Additional Copies of this Page if Necessary

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
3-26-14	CHANEY LAW FIRM	526 MAIN ST, STE 204 ARKADELPHIA, AR 71923	2,500.00	LEGAL ADVISE

Revised 12/2013

ITEMIZED EXPENDITURES OF $100 OR MORE MADE BY COMMITTEE OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC RELATIONS FIRM, OR POLITICAL CONSULTANT

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
	17. TOTAL ITEMIZED EXPENDITURES OF $100 OR MORE			2500,00
	18. TOTAL UNITEMIZED EXPENDITURES			
	19. TOTAL EXPENDITURES THIS REPORT **(includes totals from lines 17 and 18)**			2500,00