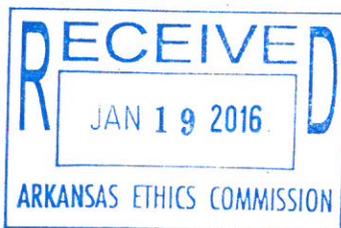


# LOCAL-OPTION BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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)

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

1. NAME OF COMMITTEE (IN FULL) <u>VOTE FOR GROWTH IN COLUMBIA COUNTY</u>		2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input checked="" type="checkbox"/> Final Report (due 30 days after election) <small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small>
ADDRESS <u>PO Box 672, MAGNOLIA, AR 71754</u>		
CITY, STATE AND ZIP CODE		
TELEPHONE NUMBER <u>870-234-7611</u>		

This report covers period: ( 12 - 25 - 14 ) through ( 1 - 19 - 16 )

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<u>5234.61</u>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<u>65052.00</u>	<u>173,471.92</u>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<u>70286.61</u>	<u>173,471.92</u>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<u>0.00</u>	

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]  
Signature of Local-Option Ballot Question Committee Officer

State of Arkansas }  
County of Columbia } ss

Subscribed and sworn before me this 19th day of January, 2016.

Laura L. McCrary  
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires \_\_\_\_\_



Adopted 12/2013





**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
<b>15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT</b>				

**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.





