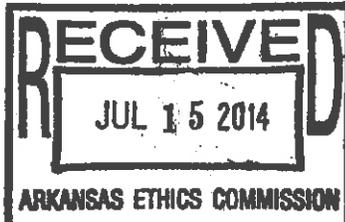


# LOCAL-OPTION BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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) <i>Craighead Pride</i>	
ADDRESS <i>P.O. Box 754</i>	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)
CITY, STATE AND ZIP CODE <i>Jonesboro AR 72401</i>	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
TELEPHONE NUMBER <i>870-926-4534</i>	

This report covers period: ( 6 - 1 - 14 ) through ( 6 - 30 - 14 )

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<i>-b</i>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<i>7500.00</i>	<i>7500.00</i>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<i>5000.00</i>	<i>5000.00</i>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<i>2500.00</i>	

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.

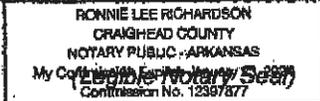
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

Signature of Local-Option Ballot Question Committee Officer

State of Arkansas

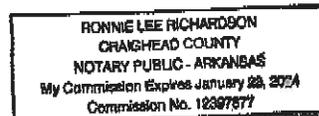
County of *Craighead* ss

Subscribed and sworn before me this *15* day of *July*, 20 *14*



Signature of Notary Public

My Commission Expires *1-23-2014*



Adopted 12/2013



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

Please Type or Print

*Crayhead Pride 6-30-14*

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
6-10-14	PCL Corporation	17739 Highway 1 Harrisburg AR 72432	N/A	7,500.00	7,500.00
<b>11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE</b>					7,500.00
<b>12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS</b>					
<b>13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT</b> <i>(Includes totals from lines 9, 11, and 12)</i>					7,500.00

**14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE**

(Does not include volunteer services by individuals)

*Crabhead Pride 6-30-14*

Date of Receipt	Name of Contributor	Street Address of Contributor	Description and Value of Nonmoney Item	Cumulative Total from this Contributor
	<i>N/A</i>			
<b>15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT</b>			<i>-0-</i>	

**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.

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

*Craighead Pride 6-30-14*

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
<i>6-11-14</i>	<i>FJW Consulting</i>	<i>1804 Starling Jonesboro AR 72401</i>	<i>5,000.00</i>	<i>Consulting fee</i>
<b>17. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE</b>			<i>5,000.00</i>	
<b>18. TOTAL UNITEMIZED EXPENDITURES</b>			<i>-0-</i>	
<b>19. TOTAL EXPENDITURES THIS REPORT</b> <small>(includes totals from lines 17 and 18)</small>			<i>5,000.00</i>	

