

# 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)

# FILED

JAN 05 2015

ARKANSAS ETHICS  
COMMISSION

BY TE

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

<b>1. NAME OF COMMITTEE (IN FULL)</b> <p style="font-size: 1.2em; text-align: center;">Greene County Beer Association</p>	<b>2. TYPE OF REPORT</b> <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input checked="" type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election)
<b>ADDRESS</b> <p style="font-size: 1.2em; text-align: center;">7392 Highway 49 South</p>	<p><small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small></p>
<b>CITY, STATE AND ZIP CODE</b> <p style="font-size: 1.2em; text-align: center;">Paragould, AR 72450</p>	
<b>TELEPHONE NUMBER</b> <p style="font-size: 1.2em; text-align: center;">870-219-9245</p>	

This report covers period: (10 - 1 - 2014) through (10 - 26 - 2014)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD		
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD		
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD		
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD		

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 Greene } ss

Subscribed and sworn before me this 18th day of November 2014

(Legible Notary Seal)

\_\_\_\_\_  
 Signature of Notary Public

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

Adopted 12/2013

