

**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.

|   |  |   |
|---|--|---|
| 1. NAME OF COMMITTEE (IN FULL)<br><u>Greene County Beer Association</u> |  | 2. TYPE OF REPORT<br><input type="checkbox"/> Monthly Report (due 15 days after end of month)<br><input type="checkbox"/> Preelection Report (due 7 days before election)*<br><input checked="" type="checkbox"/> Final Report (due 30 days after election)<br><br>*NOTE: Preelection report must be received by the Ethics Commission on or before due date. |
| ADDRESS<br><u>7392 Highway 49 South</u>                                 |  |   |
| CITY, STATE AND ZIP CODE<br><u>Paragould, Ar 72450</u>                  |  |   |
| TELEPHONE NUMBER<br><u>870-214-9245</u>                                 |  |   |

This report covers period: ( 10 - 26 - 2014 ) through ( 11 - 10 - 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]*  
Signature of Local-Option Ballot Question Committee Officer

State of Arkansas  
County of Greene } ss

Subscribed and sworn before me this 10th day of November 2014

(Legible Notary Seal)

*[Signature]*  
Signature of Notary Public

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

Adopted 12/2013

