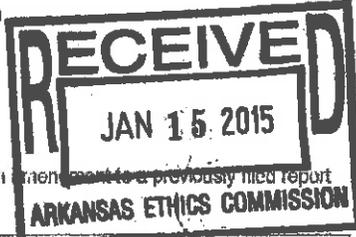


**LOCAL-OPTION BALLOT QUESTION COMMITTEE
FINANCIAL REPORT**

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 amended report to a previously filed report

1. NAME OF COMMITTEE (IN FULL)		2. TYPE OF REPORT <input checked="" type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Pre-election Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election) *NOTE: Pre-election report must be received by the Ethics Commission on or before due date.
Our Community Our Dollars		
ADDRESS	425 West Capitol Avenue Suite 1800	
CITY, STATE AND ZIP CODE	Little Rock, Arkansas 72201	
TELEPHONE NUMBER		
(501) 688-8845		

This report covers period: (12 -01 -2014) through (12 -31 -2014)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
CUMULATIVE FOR CRAIGHEAD, FAULKNER & SALINE COUNTIES		
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$ 3,386.99	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$ 0.00	\$1,465,000.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$ 3,511.25	\$1,462,114.26
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$ 2,885.74	

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.

Wally Martin
Signature of Local-Option Ballot Question Committee Officer

State of Arkansas
County of Dutaski) ss

Subscribed and sworn before me this 15 day of January, 2015.

Nandra Lane
Signature of Notary Public

(Logible Notary Seal)

My Commission Expires 4-15-2019

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

Please Type or Print

CRAIGHEAD, FAULKNER & SALINE COUNTIES

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					\$0.00
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS					\$0.00
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT <small>(Includes totals from lines 9, 11, and 12)</small>					\$0.00

Adopted 12/2013

ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE
Please Type or Print

FAULKNER COUNTY

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					\$0.00
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS					\$0.00
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT <i>(includes totals from lines 9, 11, and 12)</i>					\$0.00

Adopted 12/2013

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE

(Does not include volunteer services by individuals)

CRAIGHEAD, FAULKNER & SALINE COUNTIES

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			\$0.00	

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.

Adopted 12/2013

