

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

JUN 12 2014

ARKANSAS ETHICS
COMMISSION

BY TE

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

1. NAME OF COMMITTEE (IN FULL) <p style="font-size: 1.2em; color: blue;">They Win, You Lose Committee</p>	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) <small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small>
ADDRESS <p style="font-size: 1.2em; color: blue;">PO Box 1763 Conway, AR 72033</p>	
CITY, STATE AND ZIP CODE <p style="font-size: 1.2em; color: blue;">Conway, AR 72033</p>	
TELEPHONE NUMBER <p style="font-size: 1.2em; color: blue;">501-802-6007</p>	

This report covers period: (5-1-14) through (5-31-14)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	- 0 -	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	5250.00	5250.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	5721.84	5721.84
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	(471.84)	

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

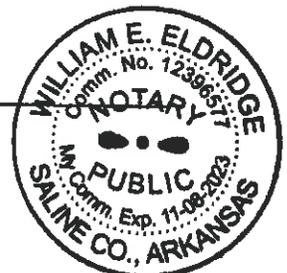
State of Arkansas
County of SALINE } ss

Subscribed and sworn before me this 12th day of JUNE 20 14

(Legible Notary Seal)

 Signature of Notary Public

My Commission Expires 11/08/2023



Adopted 12/2013

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

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
17. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE			5,523.83	
18. TOTAL UNITEMIZED EXPENDITURES			198.01	
19. TOTAL EXPENDITURES THIS REPORT (Includes totals from lines 17 and 18)			5721.84	

Adopted 12/2013

