

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

SEP 15 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;">Great Libraries Fort Smith</p>	2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input checked="" type="checkbox"/> Final Report (due 30 days after election)
ADDRESS <p style="font-size: 1.2em; color: blue;">3201 Rogers Ave.</p>	<p><small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small></p>
CITY, STATE AND ZIP CODE <p style="font-size: 1.2em; color: blue;">Fort Smith AR 72903</p>	
TELEPHONE NUMBER <p style="font-size: 1.2em; color: blue;">479-783-0229</p>	

This report covers period: (8 - 4 - 14) through (9 - 12 - 14)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	11,347.36	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	0	18,750.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	7,646.34	15,048.98
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	3,701.02	

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 Ballot Question Committee Officer

State of Arkansas

County of Sebastian^{ss}

Subscribed and sworn before me this 12th day of September, 2014.

DIANE R HOLWICK
Notary Public-Arkansas
Sebastian County
(Legible Notary Seal)
My Commission Expires 06-15-2023
Commission # 12394117

Signature of Notary Public

My Commission Expires 6-15-2023

8. LOAN INFORMATION
Please Type or Print
Do Not List Loans Previously Reported

Date	Name and Address of Lender	Amount
	None	
	9. TOTAL LOANS THIS REPORT	0

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

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
None					
11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE					⊖
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS					⊖
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)					⊖

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE
 (Does not include volunteer services by individuals)

Date of Receipt	Name of Contributor	Street Address of Contributor	Description and Value of Nonmoney Item	Cumulative Total from this Contributor
	<i>None</i>			
15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT			<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.

