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 21 2016
ARKANSAS ETHICS COMMISSION
BY

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

1. NAME OF COMMITTEE (IN FULL) Pave It Forward	
ADDRESS 659 Ouachita Avenue	2. TYPE OF REPORT [redacted] Monthly Report (due 15 days after end of month) D Preelection Report (due 7 days before election)* D Final Report (due 30 days after election)
CITY, STATE AND ZIP CODE Hot Springs AR 71901	*NOTE: Preelection report must be *received* by the Ethics Commission on or before due date.
TELEPHONE NUMBER 501-321-1700	Amended —

This report covers period: (05-01-2016) through (05-31-2016)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	100.00	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	35,000.00	35,100.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	15,221.52	15,221.52
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	19,878.48	

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 Garland } ss

Subscribed and sworn before me this 21st day of June, 2016.

Rita Koller
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires 1-16-2024

RITA KOLLER
NOTARY PUBLIC
No. 12397061
GARLAND COUNTY, ARKANSAS
My Commission Expires 1-16-2024

Revised 12/2013

20. EXPENDITURES BY CATEGORY

Please Type or Print

CATEGORY	TOTAL AMOUNT
Advertising	$15,216.52
21. TOTAL EXPENDITURES BY CATEGORY	$15,216.52

22. PAID CANVASSERS, OFFICERS, AND DIRECTORS

NAME OF PAID CANVASSER/OFFICER/DIRECTOR	AMOUNT PAID	NAME OF PAID CANVASSER/OFFICER/DIRECTOR	AMOUNT PAID
23. TOTAL AMOUNT PAID CANVASSERS, OFFICERS, AND DIRECTORS			$ -0-