

LEGISLATIVE 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

JUL 08 2013

ARKANSAS ETHICS
COMMISSION

BY _____

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

1. NAME OF COMMITTEE (IN FULL) <i>Vote Yes for Healthcare Committee</i>	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 type="checkbox"/> Final Report (due 30 days after election)
ADDRESS <i>1001 Schweiden Drive</i>	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE <i>Malvern, AR 72104</i>	
TELEPHONE NUMBER <i>501 332-1004</i>	

This report covers period: (5 - 1 - 13) through (5 - 31 - 13)

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

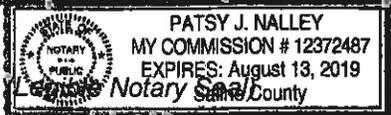
7. () **NO ACTIVITY** Check if you have not received or made any contributions during this reporting period. If you have no activity, file the first page of this report only.

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 Legislative Question Committee Officer

State of Arkansas }
County of Hot Spring } ss

Subscribed and sworn before me this 3rd day of July, 2013.



Signature of Notary Public

My Commission Expires 08/13/19

14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE

Estimated Fair Market Value If Over \$50
 (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
5-30-13	HSC Medical Center	1001 Schwedler Drive Malvern, AR 72104	1,250.00 Campaign Buttons	\$1,250.00
15. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS OF \$50 OR MORE				\$1,250.00
16. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS				-0-
17. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT (includes totals from lines 15 and 16)				\$1,250.00

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.

