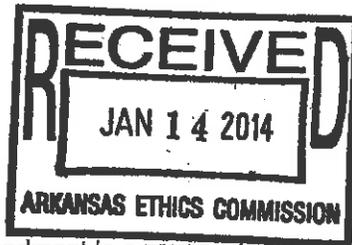


### BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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 amendment to a previously filed report

1. NAME OF COMMITTEE (IN FULL) GROWING JACKSONVILLE	
ADDRESS 930 EAST KIEHL AVENUE	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)  *NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE SHERWOOD AR 72120	
TELEPHONE NUMBER 501-425-6454	

This report covers period: (12/01/2013) through (12/31/2103)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$1,012.01	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	5,500.00	\$21,500.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	6,415.00	21,402.99
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	97.01	

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.

*Karen J. Bell*  
Signature of Ballot Question Committee Officer

State of Arkansas ) ss

County of Pulaski

Subscribed and sworn before me this 14th day of January, 2014.



*Johnette Green*  
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires 10/29/21

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

Date	Name and Address of Lender	Amount
	None	
	<b>9. TOTAL LOANS THIS REPORT</b>	





**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
	None			
<b>15. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS OF \$50 OR MORE</b>			\$0.00	
<b>16. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS</b>			\$0.00	
<b>17. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT</b> (includes totals from lines 15 and 16)			\$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.



