

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 13 2014

ARKANSAS ETHICS
COMMISSION

BY _____

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

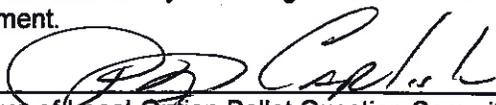
1. NAME OF COMMITTEE (IN FULL) Jacksonville Wet/Dry Campaign Committee	2. TYPE OF REPORT <input checked="" type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election)
ADDRESS 200 Dupree Dr.	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE Jacksonville, AR 72076	
TELEPHONE NUMBER 501.982.1511	

This report covers period: (05 - 16 - 2014) through (06 - 13 - 2014)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	37,330.40	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	0.00	
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	12,500.00	
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	36,088.40	

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.

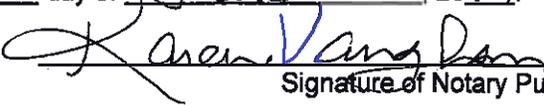


 Signature of Local-Option Ballot Question Committee Officer

State of Arkansas
County of Pulaski } ss

Subscribed and sworn before me this 13 day of June, 2014.

(Legible Notary Seal)



 Signature of Notary Public

My Commission Expires 2-3-24



