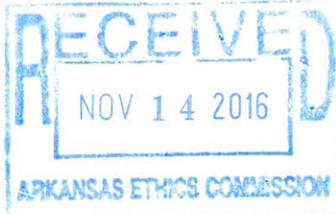


LOCAL-OPTION BALLOT QUESTION COMMITTEE FINANCIAL REPORT

To be filed with:
Arkansas Ethics Commission
Post Office Box 1917
Little Rock, AR 72203
Phone (501) 324-9800
Fax (501) 324-9808



(Arkansas Ethics Commission File Stamp)

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

1. NAME OF COMMITTEE (IN FULL) KEEP OUR DOLLARS IN JOHNSON COUNTY		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 1514 CR 2301		
CITY, STATE AND ZIP CODE CLARKSVILLE AR 72830		*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
TELEPHONE NUMBER 479-647-8019		

This report covers period: (10-1-16) through (10-31-16)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	6789.43	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	200.00	200684.54
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	5.00	193900.11
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	6784.43	

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]
Signature of Local-Option Ballot Question Committee Officer

State of Arkansas
County of Johnson) ss

Subscribed and sworn before me this 14th day of November 2016

[Signature]
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires Aug 15, 2020

Adopted 12/2013

