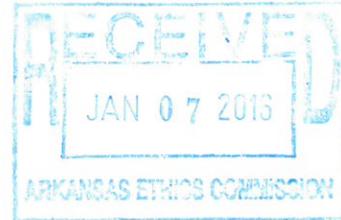


BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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) <p style="text-align: center; font-size: 1.2em;">Vote for Growth in Little River</p>	
ADDRESS <p style="text-align: center; font-size: 1.2em;">P.O. Box 369</p>	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)
CITY, STATE AND ZIP CODE <p style="text-align: center; font-size: 1.2em;">Ashdown, AR 71822</p>	*NOTE: Preliminary report must be received by the Ethics Commission on or before due date.
TELEPHONE NUMBER	

This report covers period: (12 - 1 - 15) through (12 - 31 - 15)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	2,199.19	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	.06	7,250.22
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	---	5,050.97
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	2,199.25	

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 Bailot Question Committee Officer

State of Arkansas

County of LITTLE RIVER } ssSubscribed and sworn before me this 7th day of January, 2016.

(Legible Notary Seal)

Signature of Notary Public

My Commission Expires 01/21/2025

Revised 12/2013

KAYSIE ATKINS
NOTARY PUBLIC-STATE OF ARKANSAS
LITTLE RIVER COUNTY
MY COMMISSION EXPIRES 01/21/2025
COMMISSION # 12402977

**ITEMIZED EXPENDITURES OF \$100 OR MORE MADE BY COMMITTEE
OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC
RELATIONS FIRM, OR POLITICAL CONSULTANT**

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
NONE				
17. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE				_____
18. TOTAL UNITEMIZED EXPENDITURES				_____
19. TOTAL EXPENDITURES THIS REPORT (Includes totals from lines 17 and 18)				_____

