

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

NOV 14 2013

ARKANSAS ETHICS
COMMISSION

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

1. NAME OF COMMITTEE (IN FULL) Restore Robinson 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 519 West 7th	
CITY, STATE AND ZIP CODE Little Rock, AR 72201	
TELEPHONE NUMBER 501-835-3399	

This report covers period: (10 - 25 - 13) through (10 - 31 - 13)

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

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 Ballot Question Committee Officer

State of Arkansas }
 County of Pulaski } ss

Subscribed and sworn before me this 14 day of November, 2013.

 Signature of Notary Public

(Legible Notary Seal)
 My Commission Expires 2/11/21

