

LEGISLATIVE 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

SEP 09 2013

ARKANSAS ETHICS
COMMISSION

BY _____

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

1. NAME OF COMMITTEE (IN FULL) Arkansas Valley Alliance Sales Tax Committee	2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input checked="" type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final Report (due 30 days after election)
ADDRESS 708 West Main	*NOTE: Preelection report must be <i>received</i> by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE Russellville, AR 72801	
TELEPHONE NUMBER 479-858-6555	

This report covers period: (08 - 15 - 13) through (09 - 03 - 13)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$15,827.59	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$00.00	\$23,300
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$12,392.38	\$19,864.79
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$3,435.21	

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.



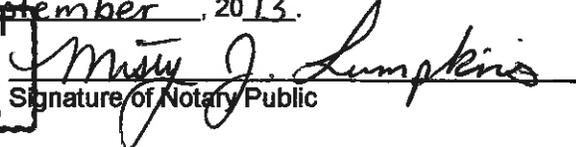
 Signature of Legislative Question Committee Officer

State of Arkansas
 County of Pope } ss

Subscribed and sworn before me this 3 day of September, 2013.

(Legible Notary Seal)

MISTY J. LUMPKINS
Notary Public
POPE COUNTY, ARKANSAS
My Commission Expires 8-18-2015



 Signature of Notary Public

My Commission Expires 8-18-2015

ITEMIZED MONETARY CONTRIBUTIONS RECEIVED BY COMMITTEE OF \$50 OR MORE
Please Type or Print

Date of Receipt	Name of Contributor	Street Address of Contributor	Amount of Contribution	Cumulative Total from this Contributor
11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE			\$00.00	
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS			\$00.00	
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)			\$00.00	

ITEMIZED EXPENDITURES MADE BY COMMITTEE OF \$100 OR MORE
Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
19. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE			\$12,392.38	
20. TOTAL UNITEMIZED EXPENDITURES			\$00.00	
21. TOTAL EXPENDITURES THIS REPORT (includes totals from lines 19 and 20)			\$12,392.38	