

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) <i>Styline Joint Venture LLC</i>		2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election) <input checked="" type="checkbox"/> Final Report (due 30 days after election)
ADDRESS <i>120 So. Glenwood P.O. Box 986</i>		
CITY, STATE AND ZIP CODE <i>Russellville, AR 72801</i>		
TELEPHONE NUMBER <i>479-968-4000</i>		

This report covers period: *08-06-13* through *09-09-13*

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<i>-0-</i>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<i>2849.70</i>	<i>2849.70</i>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<i>2849.70</i>	<i>2849.70</i>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<i>-0-</i>	

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.

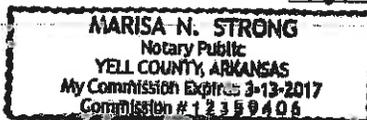
Michael Peel Member
Signature of Ballot Question Committee Officer

State of Arkansas

County of *Pease* } ss

Subscribed and sworn before me this *9* day of *Sept* 20*13*

Marisa N. Strong



8. ITEMIZED MONETARY CONTRIBUTIONS RECEIVED BY COMMITTEE OF \$100 OR MORE

Please Type or Print
Use Additional Copies of this Page if Necessary

Date of Receipt	Name of Contributor	Street Address of Contributor	Amount of Contribution	Cumulative Total from this Contributor
8/12/13	Shelone Jant Venture LLC	120 So. Homewood Road, AL	2849.70	8190.20



12. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE
 (Does not include volunteer services by individuals)

Date of Receipt	Name of Contributor	Street Address of Contributor	Description and Value of Nonmoney Item	Cumulative Total from this Contributor
13. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS			0-0-	
14. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS			-0-	
15. TOTAL NONMONEY CONTRIBUTIONS			-0-	

IMPORTANT

In addition to monetary contributions, committees should report the receipt of any nonmoney ("in-kind") contributions. A committee receives an in-kind contribution whenever a person provides the committee with an item or service without charge or for a charge that is less than the fair market value of the item or service in question.

19. TOTAL EXPENDITURES (to be entered on line #5)

2849.70

