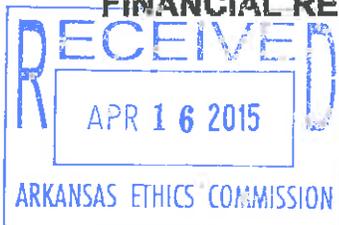


**BALLOT QUESTION COMMITTEE  
FINANCIAL REPORT**

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>Blue, Gold, and You</i>	
ADDRESS <i>P.O. Box 909</i>	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 <i>Shelton, AR 72150</i>	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
TELEPHONE NUMBER <i>(501) 315-6812</i>	

This report covers period: (03 - 01 - 15 ) through (03 - 31 - 15 )

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<i>14,673.05</i>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<i>10,360.00</i>	<i>25,050.00</i>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<i>3,086.00</i>	<i>3,042.78</i>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<i>22,007.05</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.

*Jordan Wallright*  
\_\_\_\_\_  
Signature of Ballot Question Committee Officer

State of Arkansas )  
County of \_\_\_\_\_ ) ss

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Legible Notary Seal)

\_\_\_\_\_  
Signature of Notary Public

My Commission Expires \_\_\_\_\_



10. ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE

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

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
3/3/15	Phil Tygart	821 N. Rock Street Sheridan, AR 72150	Pharmacist	1,500.00	1,500.00
3/3/15	Sperry Hedden	821 N. Rock Street Sheridan, AR 72150	Pharmacist	1,500.00	1,500.00
3/4/15	Masley Holdings	P.O. Box 476 Sheridan, AR 72150	Investment company	1,500.00	1,500.00
3/4/15	Southwest Radiator	4201 Baseline Road Little Rock, AR 72209	Repair Shop	1,000.00	1,000.00
3/6/15	Casey Hedden	10 Julia Drive Sheridan, AR 72150	Tygart Healthmart	500.00	500.00
3/10/15	Superior Real Estate	2113 Arch Street Little Rock, AR 72206	Real Estate	100.00	100.00
3/10/15	Allen Gate & Pallet, Inc.	29 Grant 441 Prattville, AR 72129	Contractor	200.00	200.00
3/12/15	David Lunsford	284 Grant 167277 Sheridan, AR 72150	Taylor & Lunsford Land & Timber Co.	200.00	200.00
3/13/15	Stacyon Tubert	148 Grant 171 Sheridan, AR 72150	Tubert Transportation	150.00	150.00
3/18/15	Al Upton	5700 Pleasant Lake Dr. Hensley, AR 72065	Retired	750.00	750.00
3/19/15	Casey Winters	696 Timber Ridge Cir. Sheridan, AR 72150	Tygart Healthmart	100.00	100.00
3/19/15	SouthArk Telephone Co.	Hampton, AR 71744	Telephone Company	2,500.00	2,500.00
3/30/15	Doug West	P.O. Box 501 Sheridan, AR 72150	Sheridan School District	200.00	200.00
3/31/15	Stephen Shizon	36 Grant 69 Sheridan, AR 72150	Grant Co. Prosecuting Atty	150.00	150.00

**ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE**

Please Type or Print

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
<b>11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE</b>					<b>10,350.00</b>
<b>12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS</b>					<b>- 0 -</b>
<b>13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT</b> <small>(Includes totals from lines 9, 11, and 12)</small>					<b>10,350.00</b>

**14. 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
		NONE.		
<b>15. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT</b>			- 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.





