

# 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 25 2013

ARKANSAS ETHICS  
COMMISSION

BY \_\_\_\_\_

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

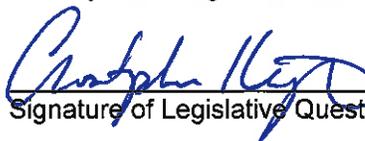
<b>1. NAME OF COMMITTEE (IN FULL)</b> Jobs for St. Francis County Committee	
<b>ADDRESS</b> 203 N. IZARD ST	<b>2. TYPE OF REPORT</b> <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input checked="" type="checkbox"/> Final Report (due 30 days after election)
<b>CITY, STATE AND ZIP CODE</b> Forrest City, AR 72335	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
<b>TELEPHONE NUMBER</b> 870 633 1651	

This report covers period: (8-3-2013) through (9-15-2013)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$0.00	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$5,000	\$30,000
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$22,499.89	\$25,712.46
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$4,287.54	

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

) ss

County of St. Francis

Subscribed and sworn before me this 20<sup>th</sup> day of September, 2013.

**Anne Kelso**  
 County of St. Francis  
 Notary Public - State of Arkansas  
 (Commission No. 1237812)

  
 Signature of Notary Public

My Commission Expires 08/01/2020  
 My Commission Expires 08/01/2020





**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
<b>11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE</b>				<b>\$5,000</b>
<b>12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS</b>				
<b>13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT</b> (includes totals from lines 9, 11, and 12)				<b>\$5,000</b>

**14. NONMONEY CONTRIBUTIONS RECEIVED BY COMMITTEE**

Estimated Fair Market Value If Over \$50  
 (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
<b>15. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS OF \$50 OR MORE</b>				
<b>16. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS</b>				
<b>17. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT</b> (includes totals from lines 15 and 16)				

**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.



