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
OCT 07 2014
ARKANSAS ETHICS COMMISSION
BY TE

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

1. NAME OF COMMITTEE (IN FULL) ARKANSANS FOR RESPONSIBLE MEDICINE	
ADDRESS 1501 N University 228	**2. TYPE OF REPORT** ☒ Monthly Report (due 15 days after end of month) ☐ Preelection Report (due 7 days before election)* ☐ Final Report (due 30 days after election)
CITY, STATE AND ZIP CODE Little Rock, AR 72207	*NOTE: Preelection report must be *received* by the Ethics Commission on or before due date.
TELEPHONE NUMBER 501 661 1300	

This report covers period: (8-1-14 **) through (** 8-31-14 **)**

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	289 63	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	0	
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	0	
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	289 63	

7. (X) **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 7th day of October, 2014.

(Legible Notary Seal)

Signature of Notary Public

My Commission Expires 10-16-2017

OFFICIAL SEAL
LANETT M. DETAR
No. 12362822
PULASKI COUNTY
My Commission Expires 10-16-2017
NOTARY PUBLIC ARKANSAS

Revised 12/2013