

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

JUN 27 2012

ARKANSAS ETHICS
COMMISSION

BY _____

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

| | |
|--|--|
| 1. NAME OF COMMITTEE (IN FULL) ARKANSAS DEVELOPMENT I, LLC | 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) |
| ADDRESS 17200 CHENAL PKWY, SUITE 323 | *NOTE: Preelection report must be received by the Ethics Commission on or before due date. |
| CITY, STATE AND ZIP CODE LITTLE ROCK, AR 72223 | |
| TELEPHONE NUMBER 501-850-3247 | |

This report covers period: (03 - 08 - 2012) through (03 - 31 - 2012)

| 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 | \$ 175,000.00 | \$ 175,000.00 |
| 5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD | \$ 45,004.67 | \$ 45,004.67 |
| 6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD | \$ 129,995.33 | |

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.

Bob Womack

Signature of Ballot Question Committee Officer

State of Arkansas

County of Saline) ss

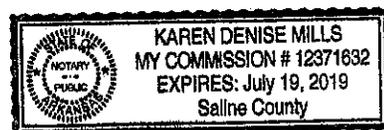
Subscribed and sworn before me this 27 day of June, 2012.

Karen Denise Mills

Signature of Notary Public

(Legible Notary Seal)

My Commission Expires July 19, 2019



Revised 07/07

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 |
|---|---------------------|-------------------------------|--|--|
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| 15. TOTAL ITEMIZED NONMONEY CONTRIBUTIONS OF \$50 OR MORE | | | | |
| 16. TOTAL NONITEMIZED NONMONEY CONTRIBUTIONS | | | | |
| 17. TOTAL NONMONEY CONTRIBUTIONS THIS REPORT (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.

