

# 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

JUL 15 2016

ARKANSAS ETHICS  
COMMISSION

BY *[Signature]*

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

<b>1. NAME OF COMMITTEE (IN FULL)</b> Arkansas Wins in 2016, LLC	<b>2. TYPE OF REPORT</b> <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)  <small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small>
<b>ADDRESS</b> 734 Brewer Road	
<b>CITY, STATE AND ZIP CODE</b> Stuttgart, AR 72160	
<b>TELEPHONE NUMBER</b> 501-256-2761	

**This report covers period: (-June-01 2016) through (June-30 2016)**

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	\$10,600.00	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	\$ 00.00	
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	\$ 10,400.00	
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	\$ 200.00	
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.

*Jim Thompson*  
Signature of Ballot Question Committee Officer

State of Arkansas  
County of Lonoke } ss

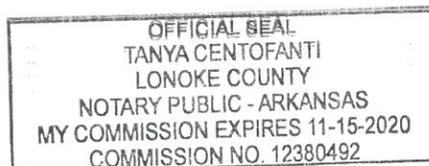
Subscribed and sworn before me this 14th day of July, 2016

*[Signature]*  
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires 11-15-2020

Revised 12/2013













**ITEMIZED EXPENDITURES OF \$100 OR MORE MADE BY COMMITTEE  
OR ON BEHALF OF COMMITTEE BY ADVERTISING AGENCY, PUBLIC  
RELATIONS FIRM, OR POLITICAL CONSULTANT**

Please Type or Print

Date	Name of Person to Whom Expenditure was Made	Street Address	Amount of Expenditure	Purpose of Expenditure
<b>17. TOTAL ITEMIZED EXPENDITURES OF \$100 OR MORE</b>			\$10,400.00	
<b>18. TOTAL UNITEMIZED EXPENDITURES</b>			0.00	
<b>19. TOTAL EXPENDITURES THIS REPORT</b> (includes totals from lines 17 and 18)			\$10,400.00	

