

# 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

SEP 11 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> Arkansans For Compassionate Care	
<b>ADDRESS</b>  P O Box 420	<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)
<b>CITY, STATE AND ZIP CODE</b>  Hensley, AR 72065	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
<b>TELEPHONE NUMBER</b> 501-416-0148	

**This report covers period: ( 08 - 01-2013) through (08 - 31-2013 )**

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	-11,423.66	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	125.00	715,041.87
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	176.46	708,514.33
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	-11,475.12	

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.

*Melissa Jelts*

Signature of Ballot Question Committee Officer

State of Arkansas  
County of Pulaski ) ss

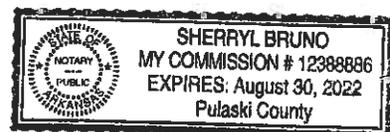
Subscribed and sworn before me this 11 day of September, 2013

*Sherryl Bruno*  
Signature of Notary Public

(Legible Notary Seal)

My Commission Expires Aug 30, 2022

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
<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.

