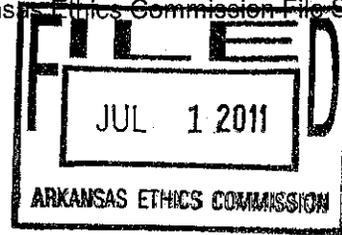


BALLOT QUESTION COMMITTEE FINANCIAL REPORT

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)



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

1. NAME OF COMMITTEE (IN FULL) <i>Committee for a Fair Insurance Tax</i>	2. TYPE OF REPORT <input 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 <i>One Cantrell Center 2800 Cantrell Road, Suite 500</i>	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
CITY, STATE AND ZIP CODE <i>Little Rock, AR 72202</i>	
TELEPHONE NUMBER	

This report covers period: (*6-1-11*) through (*6-30-11*)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<i>\$54,586.²⁵</i>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<i>— 0 —</i>	
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<i>— 0 —</i>	
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<i>\$54,586.²⁵</i>	

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.

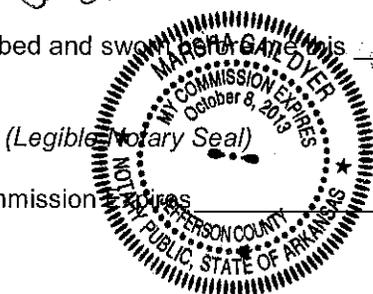
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

Signature of Ballot Question Committee Officer

State of Arkansas

County of *Jackson* } ss

Subscribed and sworn to this *10th* day of *June*, 20 *11*.



Signature of Notary Public

My Commission Expires _____