

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

DEC 03 2014

ARKANSAS ETHICS
COMMISSION

BY TE

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

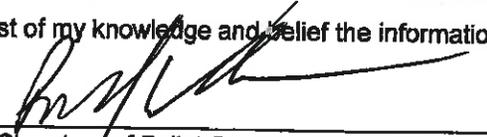
1. NAME OF COMMITTEE (IN FULL) <u>GIVE US A RAISE</u>	2. TYPE OF REPORT <input type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input checked="" type="checkbox"/> Final Report (due 30 days after election) <small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small>
ADDRESS <u>1250 EYE ST NW, Ste. 250</u>	
CITY, STATE AND ZIP CODE <u>WASH, DC 20005</u>	
TELEPHONE NUMBER <u>202-558-4631</u>	

This report covers period: (10 - 26 - 14) through (11 - 04 - 14)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<u>50</u>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<u>200,000.00</u>	<u>200,000.00</u>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<u>189,862.97</u>	<u>189,862.97</u>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<u>10,137.03</u>	

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.

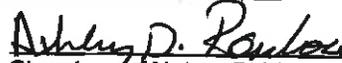
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.


 Signature of Ballot Question Committee Officer

State of Arkansas } ss
County of _____

Subscribed and sworn before me this 3 day of December, 2014.

(Legible Notary Seal)


 Signature of Notary Public

My Commission Expires 2/26/2019



