

# 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

FEB 20 2014

ARKANSAS ETHICS  
COMMISSION

BY \_\_\_\_\_

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

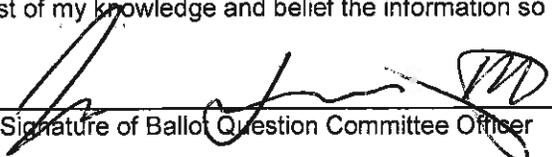
<b>1. NAME OF COMMITTEE (IN FULL)</b> <i>Arkansas Initiative for Marriage Equality</i>	<b>2. TYPE OF REPORT</b> <input checked="" type="checkbox"/> Monthly Report (due 15 days after end of month) <input type="checkbox"/> Preelection Report (due 7 days before election)* <input type="checkbox"/> Final 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> <i>1015 W 2nd St, Suite 208 Little Rock, AR</i>	
<b>CITY, STATE AND ZIP CODE</b> <i>Little Rock, AR 72201</i>	
<b>TELEPHONE NUMBER</b> <i>501-350-2725</i>	

This report covers period: ( 1 - 1 - 14 ) through ( 1 - 31 - 14 )

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	74.66	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	706	3284.46
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	635	3134.8
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	145.66	

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.

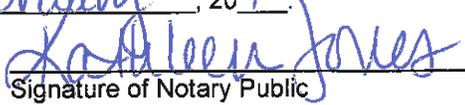
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

  
 Signature of Ballot Question Committee Officer

State of Arkansas

County of Pulaski } ss

Subscribed and sworn before me this 20th day of February, 2014

  
 Signature of Notary Public

(Official Notary Seal)  
**KATHLEEN JONES**  
 PULASKI COUNTY  
 NOTARY PUBLIC - ARKANSAS  
 MY COMMISSION EXPIRES MARCH 31, 2015







**ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE RECEIVED BY COMMITTEE**

Please Type or Print

Date of Receipt	Name of Contributor	Street Address of Contributor	Place of Business Employer/Occupation	Amount of Contribution	Cumulative Total from this Contributor
<b>11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE</b>					500
<b>12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS</b>					206
<b>13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)</b>					706

Revised 12/2013





