

# LOCAL-OPTION 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

OCT 23 2014

ARKANSAS ETHICS  
COMMISSION

BY TE

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

<b>1. NAME OF COMMITTEE (IN FULL)</b> Citizens For Local Rights	<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>ADDRESS</b> 1515 East 4th Street	*NOTE: Preelection report must be received by the Ethics Commission on or before due date.
<b>CITY, STATE AND ZIP CODE</b> Little Rock, AR 72202	
<b>TELEPHONE NUMBER</b> 501-351-4598	

This report covers period: ( 9 - 1 - 14 ) through ( 9 - 30 - 14 )

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	444,819.13	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	319,996.00	1,618,246.00
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	413,322.51	1,266,753.38
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	351,492.62	

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.

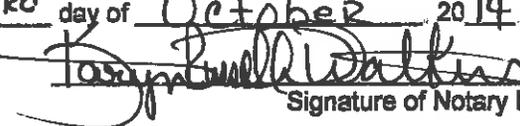
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement

  
 \_\_\_\_\_  
 Signature of Local-Option Ballot Question Committee Officer

State of Arkansas  
County of Pulaski } ss

Subscribed and sworn before me this 23<sup>rd</sup> day of October 2014

(Legible Notary Seal)

  
 \_\_\_\_\_  
 Signature of Notary Public

My Commission Expires 7-1-2015





**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>			413,322.51	
<b>18. TOTAL UNITEMIZED EXPENDITURES</b>			0	
<b>19. TOTAL EXPENDITURES THIS REPORT</b> (includes totals from lines 17 and 18)			413,322.51	

Adopted 12/2013

