

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

MAR 15 2016

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

ARKANSAS ETHICS
COMMISSION

BY AW

| | |
|---|--|
| 1. NAME OF COMMITTEE (IN FULL) <p style="text-align: center; font-size: 1.2em;">Let Locals Decide</p> | 2. TYPE OF REPORT <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) |
| ADDRESS <p style="text-align: center; font-size: 1.2em;">1501 N. University 228</p> | <p><small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small></p> |
| CITY, STATE AND ZIP CODE <p style="text-align: center; font-size: 1.2em;">Little Rock, AR 72207</p> | |
| TELEPHONE NUMBER <p style="text-align: center; font-size: 1.2em;">501 661-1300</p> | |

This report covers period: (2 - 1 - 16) through (2 - 29 - 16)

| SUMMARY | FOR REPORTING PERIOD | CUMULATIVE TOTALS |
|--|----------------------|-------------------|
| 3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD | 0 | |
| 4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD | 187,500 | 187,500 |
| 5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD | 0 | 0 |
| 6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD | 187,500 | |

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 15th day of March, 2016.

(Legible Notary Seal)

Signature of Notary Public

My Commission Expires 10-16-2017

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 |
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| 11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE | | | | | 187,500 |
| 12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS | | | | | |
| 13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12) | | | | | 187,500 |

