

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 Arkansas Lotteries and Casinos</i>	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 <i>101 South Moose Street</i>	
CITY, STATE AND ZIP CODE <i>Morrilton, Arkansas, 72110</i>	
TELEPHONE NUMBER <i>501-354-2555</i>	

This report covers period: (6 - 1 - 10) through (6 - 30 - 10)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	<i>877.67</i>	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	<i>0</i>	<i>4,000.00</i>
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	<i>0</i>	<i>3,122.33</i>
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	<i>877.67</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.

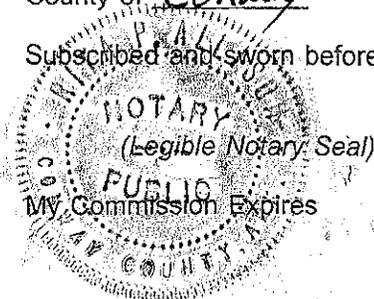
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement.

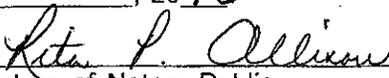

 Signature of Ballot Question Committee Officer

State of Arkansas

County of Conway } ss

Subscribed and sworn before me this 1st day of July, 20 10




 Signature of Notary Public