

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

SEP 08 2014

ARKANSAS ETHICS
COMMISSION

BY TE

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

1. NAME OF COMMITTEE (IN FULL) <p style="font-size: 1.2em; color: blue;">Committee for Arkansas Lotteries & Casinos</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) <small>*NOTE: Preelection report must be received by the Ethics Commission on or before due date.</small>
ADDRESS <p style="font-size: 1.2em; color: blue;">101 South Moose St.</p>	
CITY, STATE AND ZIP CODE <p style="font-size: 1.2em; color: blue;">Morrilton, Ar, 72110</p>	
TELEPHONE NUMBER <p style="font-size: 1.2em; color: blue;">501 - 354 2555</p>	

This report covers period: (8 - 1 - 2014) through (8 - 31 - 2014)

SUMMARY	FOR REPORTING PERIOD	CUMULATIVE TOTALS
3. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD	1000 ⁰⁰	
4. TOTAL MONETARY CONTRIBUTIONS RECEIVED DURING REPORTING PERIOD	1000 ⁰⁰	\$ 6,000 ⁰⁰
5. TOTAL EXPENDITURES MADE DURING REPORTING PERIOD	296 ⁰⁰	5,296 ⁰⁰
6. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD	704 ⁰⁰	

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 8th day of September, 2014.

THERESA A PALADINO
 NOTARY PUBLIC-STATE OF ARKANSAS
 CONWAY COUNTY
 (Legible Notary Seal)
 My Commission Expires 1-1-2023
 Commission # 12391367

Signature of Notary Public

8. LOAN INFORMATION
 Please Type or Print
 Do Not List Loans Previously Reported

Date	Name and Address of Lender	Amount
8-28-14	Charles L. Ormond 101 South Moose St, Morrilton, Ar. 72110	1,000 ⁰⁰
8-29-14		
9. TOTAL LOANS THIS REPORT		1,000 ⁰⁰

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
11. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OF \$50 OR MORE					<i>None</i>
12. TOTAL UNITEMIZED MONETARY CONTRIBUTIONS					<i>None</i>
13. TOTAL MONETARY CONTRIBUTIONS THIS REPORT (includes totals from lines 9, 11, and 12)					<i>None</i>

